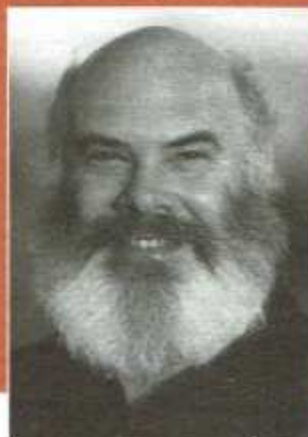




Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

Premiere Issue

Dear Reader,
Welcome to the premiere issue of *Self Healing*. I decided to start this newsletter when I realized how many people were interested in getting advice from a physician who had solid scientific training as well as experience with herbs, supplements, and mind-body medicine.

As a practitioner of integrative medicine, I draw from the safest and most effective therapies in both conventional and alternative medicine to stimulate the body's own healing powers. In issues to come, I'll show you how an integrative approach can help you get and stay well. Sincerely,

You can write to us at *Self Healing*, 42 Pleasant St., Watertown MA 02472.

INSIDE

Perimenopause: The Change Before the Change	2
Choosing a Cooking Oil	3
Ask Dr. Weil: Garlic in a Pill; Nail Fungus; and More	4
The Power of Guided Imagery	4
Breathwork's Benefits	5
When Herbs and Drugs Don't Mix	8

Why I Take Supplements

When it comes to obtaining the vitamins and minerals your body needs, your best possible source is food. After all, eating a richly varied diet—including plenty of fresh fruits and vegetables, whole grains, and legumes—is the most natural, most enjoyable, and tastiest way I know to meet your nutritional needs. Scientists are increasingly recognizing that, in addition to vitamins and minerals, there are other compounds found in foods—such as fiber and phytochemicals—that serve as powerful preventive agents, protecting your body against cancer, cardiovascular disease, and other conditions. Indeed, it's hard to replicate in a pill or capsule the exact substances and combinations that nature has already placed in food.

There are times, though, when a good diet may not be good enough. As evidence mounts, many experts have moved away from thinking of vitamins and minerals primarily as substances needed to prevent deficiency diseases (which are rare these days) and are acknowledging their broader role in promoting optimum health. Researchers are finding that some important vitamins and minerals (vitamin E, for instance) are hard to get in amounts considered protective against disease through diet alone, no matter how conscientious an eater you are. That's perhaps the main reason why I take supplements faithfully, and why I encourage my patients to take certain vitamins and minerals on a regular basis.

I'm not a fan of taking a lot of pills, and I know that for some people buying and taking supplements can seem bewildering, bothersome, and expensive. I consider supplements as a long-term investment in good health: The money I spend now on *prevention* is pocket

Here's a handy guide to the vitamins and minerals you may want to take every day.

change compared to the possible future expenses of medication, hospital stays, and surgical procedures. Most of the supplements I recommend are fairly inexpensive, and it's fine to buy cheaper versions as long as they meet the dosage and formulation guidelines that I'll spell out for you in this article.

Remember, supplements are by no means substitutes for eating well; you'll still need to make smart food choices. I see supplements as part of an overall health strategy to optimize your body's own natural healing potential, including eating well, exercising regularly, managing stress, not smoking, and limiting alcohol consumption. By making these and other lifestyle changes now, you'll be ensuring your health for many years to come.

Now I'd like to tell you about the vitamins and minerals that I take on a daily basis as well as the amounts I recommend. There's no need to take more than the amounts suggested, since more is not necessarily better and in some instances (such as selenium) may even be harmful. For some people, a daily multivitamin with minerals (or a multimineral formula) may be more convenient than taking numerous pills, and I feel that it's certainly better than nothing at all. But you'll want to read the product label carefully to see what your multi contains compared with my recommended dosage and consider making up any differences with individual supplements.

continued on page 6

Perimenopause: The Change Before the Change

The symptoms catch many women by surprise: One woman starts waking suddenly in the early hours of the morning and can't get back to sleep. Another notices that her periods have become alarmingly heavy, and that she's spotting mid-cycle. Still another begins getting flushed and drenched with sweat at odd times during the day—although she's barely into her forties.

Episodes such as these can be very disturbing when they happen for no apparent reason. But in fact they're all perfectly normal symptoms of perimenopause (literally, "around menopause"), the period of hormonal fluctuation before menopause that has been called "the change before the change." Symptoms can start as early as age 35 and last some 4 to 10 years before the cessation of periods marks the official onset of menopause. While the word *perimenopause* was almost never heard even a few years ago, lately I've noticed it's become the focus of several books and articles in women's magazines with catchy titles like *The Power of Perimenopause* and "Too Young for Hot Flashes?" I find this trend encouraging: As millions of female baby boomers continue to age, the demand for information about perimenopause is rapidly increasing. But at times, the research on this natural phase of life has been lagging.

What happens during perimenopause? In the several years before a woman stops menstruating, her body goes through something like puberty in reverse. Levels of reproductive hormones are gradually decreasing over the long-term, but in the short-term they may be fluctuating wildly, surging one day and plummeting the next. (As one author on the subject put it, "Your hormones are not giving up without a fight.") Some women have few or no symptoms during perimenopause, while an estimated 20 percent experience physical and psychological upheavals serious enough to disrupt daily functioning. PMS may bother some women for the first time in their lives, for example, while others find its familiar effects lasting longer. Hot flashes, insomnia, difficulty concentrating, and menstrual irregularities may cause anxiety and fatigue. Such symptoms can come and go over several years.

Because many of the troubling symptoms of perimenopause are produced by fluctuating hormones, some conventional physicians prescribe low-dose birth control

pills or a form of hormone replacement therapy to even out cycles. As with any type of hormone use, the decision to try this may be difficult, and you and your doctor will want to weigh the risks and benefits carefully. In general, I would prefer that you try the natural alternatives described below before opting for hormonal treatment.

Meanwhile, for women in this phase of life, simply knowing that there is such a thing as perimenopause—and that its symptoms are temporary—is often a great relief. I have also seen lifestyle changes such as stress reduction, good nutrition, exercise, and a positive outlook make a significant difference in the way women experience this natural transition. Below are some common complaints of perimenopause, as well as some herbal remedies and self-care measures that can help keep them under control.

Help for Heavy Bleeding

Most women expect to experience changes in their menstrual cycles as they approach menopause. But many don't realize that their periods may get heavier before they get lighter, or that they may begin bleeding between cycles. For some women, oral micronized progesterone (alone or with estrogen) can relieve such heavy bleeding. While these symptoms are often a normal consequence of hormonal fluctuation, a woman who experiences any unusual bleeding should be sure to tell her gynecologist in order to rule out other causes such as fibroid tumors or endometrial cancer. If your symptoms are bothersome, I suggest experimenting with the natural remedies below:

- **Take chaste tree (*Vitex*).** A recent double-blind study of European women with low progesterone levels (a factor in heavy bleeding) found that this herb helped normalize menstrual cycles and raise levels of progesterone and estrogen, without causing side effects. Take 20 drops of tincture (about 30 to 40 mg) twice a day. Since this herb does have hormonal effects, it should not be used by women who are on birth control pills or some forms of hormone replacement therapy.

- **Pass the flax.** Compounds in flax seeds may help prevent heavy bleeding, and flax is also a good source of heart-healthy omega-3 essential fatty acids. Eat 1 to 2 tablespoons a

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Carl Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Carretani
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamway
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. • Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals postage paid at Boston MA and additional mailing offices. Copyright 2002, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. • This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING: 42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 521-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

day of ground flax seeds (use a coffee grinder)—sprinkle it on soups, salads, or cereal. Because of their fiber content, flax seeds will increase stool bulk and can have a laxative effect. Flax seeds are available at health food stores.

Easing Premenstrual Syndrome

PMS, with its attendant mood swings, bloating, and irritability, may be exacerbated by the hormonal fluctuations of this transitional period. Eating a nutritious diet (preferably several small meals a day, including foods that are low in sodium and high in omega-3 fatty acids and vitamin B-6), exercising faithfully, practicing relaxation, and seeking peer support are enormously helpful measures. In addition, I highly recommend the following approaches:

- **Eliminate caffeine.** Giving up coffee alone can make a dramatic improvement in PMS symptoms in many women. Say no to chocolate, too: You may crave it, but it will only make you feel worse.
- **Take calcium-magnesium supplements.** In studies, these minerals have been found to ease PMS symptoms. You'll want to take 1,000 to 1,500 mg of calcium and half that amount of magnesium in divided doses each day.
- **Try evening-primrose oil or black-currant oil.** These are natural sources of an unusual fatty acid called gamma-linolenic acid (GLA) that moderates synthesis of prostaglandins, hormones thought to be involved in a variety of PMS symptoms, especially breast tenderness. Take one 500 mg capsule of either twice a day, for at least two months.

Coping with Hot Flashes and Insomnia

These hallmark signs of menopause often begin during perimenopause and can affect women at a surprisingly young age. When hot flashes happen at night, they're called night sweats and may result in frequent awakenings. Some women experience insomnia unrelated to hot flashes, however. The following approaches should help with both:

- **Relax.** Researchers at the Mind/Body Medical Institute in Boston have found that the relaxation response decreases the intensity and frequency of hot flashes by some 70 percent and helps reduce insomnia. Commit to practicing some form of relaxation therapy—such as meditation, breathwork, or yoga—for 20 minutes twice a day.
- **Get moving.** In one Swedish study, menopausal women who exercised for at least 3 1/2 hours a week had no hot flashes, while the control group did. To exercise at the level of intensity that women need as their metabolism begins to shift, some experts recommend adding some form of weight training to regular aerobic exercise such as brisk walking.
- **Stock up on soy.** A 1998 Italian study of 104 women found that those who consumed soy protein daily reported 45 percent fewer flashes by the end of eight weeks. Soy's natural plant hormones—phytoestrogens called isoflavones—provide a gentle estrogenic action in the body and may also help build bones and reduce risk of breast cancer. Aim to take in 30 to 50 mg of isoflavones a day from such soy foods as tofu, soy milk, green soybeans, and some meat substitutes.
- **Supplement with vitamin E.** Anecdotal evidence suggests that vitamin E can help alleviate hot flashes in many

NUTRITION

Choosing a Cooking Oil

With such a wide array of oils on the supermarket shelf, picking one to cook with may seem daunting. But for me, the choice is simple: I've long been urging people to use olive oil as a principal cooking fat, not only because it tastes good, but because it has indisputable health benefits.

Professional cooks will tell you not to waste **extra-virgin olive oil** in cooking—saving it for marinades or on bread—but I don't believe that. I think it's worth investing in extra-virgin olive oil because it represents the first gentle pressing of the olives and is less tampered with than other kinds. The best olive oils are greenish-yellow and have a delightful fruity aroma. You can find these good-quality, natural forms of olive oil in most supermarkets.

For times when you need a neutral-tasting oil, such as when you're baking cakes and cookies, a good option is to use **extra-light olive oil**, which has been refined somewhat (making it not quite as healthy as the regular variety). Two other options are **grapeseed oil**, which contains mostly polyunsaturated fats and can withstand higher cooking temperatures than most oils, and **canola oil**, which is mostly monounsaturated fat and has the least amount of saturated fats of all oils. Despite scare stories, canola oil is not toxic.

Grapeseed oil is a good choice for sautéing, stir-frying, or even baking, and it's sold in gourmet and health food stores. When buying canola oil, choose organic, expeller-pressed brands. Other brands may contain pesticides and are extracted with heats and solvents in a way that damages the fatty-acid chemistry. ☉

women—an added incentive to take this vitamin as part of my standard antioxidant regimen.

- **Try herbal remedies.** The herb black cohosh (*Cimicifuga racemosa*) is a useful remedy for hot flashes, according to Tieraona Low Dog, MD, an Albuquerque-based colleague of mine. Look for a standardized extract and follow package directions. Another colleague, Marcey Shapiro, MD, who is based in Berkeley, California, reports that the herb motherwort (*Leonurus cardiaca*) is helpful to her patients with hot flashes. She recommends using motherwort in tincture form; follow package directions.

A note of caution: Do *not* take these herbs (or the herb dong quai) if you are experiencing heavy menstrual bleeding (it may exacerbate this condition) or if you're on hormone replacement therapy (the herbs may have hormonal actions).

- **Use an herbal sleep aid.** If insomnia remains a problem, try valerian-root extract (follow package directions). ☉

For a more comprehensive look at perimenopause—covering both alternative and conventional treatment approaches—I recommend that women read Dr. Susan Love's *Hormone Book* (Random House, 1998).

Garlic in a Pill; Nail Fungus; and More

Do garlic supplements offer the same health benefits as fresh garlic?

If you're familiar with my books, you know that I'm a garlic enthusiast. Fresh garlic is a useful tonic for the cardiovascular system: It appears to lower blood pressure slightly, reduce total cholesterol somewhat while raising levels of HDL ("good") cholesterol, and inhibit the clotting tendency of the blood. Garlic also serves as a potent antibiotic, and several studies show it to be an anticancer agent. For these reasons, I recommend that everyone include more fresh garlic in their diet, perhaps a clove a day—some raw, if you can, and some lightly cooked.

I'm not a fan of garlic pills, despite their extraordinary popularity. All of them are processed garlic that may or may not reproduce the many useful effects of the whole, fresh herb. The best of these products are standardized for a compound called allicin. But the chemistry of garlic is

complex, and I have not seen any evidence that allicin is its sole healthful component, or even the most important. I recommend against using garlic supplements except as last resorts—if you are traveling, say, and simply can't get the real thing.

I've read that sprouts are carcinogenic. Should I cut them out of my diet?

Sprouts of legumes (alfalfa, clover, mung beans, lentils, garbanzos, and so on) contain toxins that are broken down by cooking in water, so they should not be eaten raw. I don't eat alfalfa sprouts at all, as they contain canavanine, a toxin that can harm the immune system, and cooking turns them into an unappetizing mush. I do, however, eat lightly cooked mung bean sprouts and raw sprouts of non-leguminous seeds such as sunflower, radish, and buckwheat.

FOCUS ON THERAPY

The Power of Guided Imagery

Interactive Guided Imagery is an updated version of visualization therapy, a remarkably creative and effective way to take advantage of the mind-body connection. It's one of the natural therapies I recommend most frequently to patients, because my family and I have had success with it ourselves. (See my book *Spontaneous Healing* for accounts of these experiences.) I find the method so useful that I require all the physician Fellows who train at the Program in Integrative Medicine at the University of Arizona in Tucson to learn this technique.

The premise of this therapy is that the patient's unconscious mind has valuable information on the origin and nature of illness

as well as on its potential resolution. The job of the therapist is to facilitate movement of this information into consciousness and encourage the patient to act on it.

A guided-imagery session begins with the induction of a state of relaxation and focused attention. The therapist might ask you to picture yourself in some actual scene where you feel very comfortable and to describe the details of that scene. (People who do not visualize well can get just as much benefit by paying attention to body sensations rather than visual images.) Next, the therapist might direct your attention to the part of your body that is ailing and ask you to enter into an imaginary dialogue with it. In the inter-

action between you and the therapist and you and your body, opportunities open for intuitive, unconscious knowledge to bubble up into waking consciousness. The therapist can then help you interpret the information and put it to use.

Interactive Guided Imagery is an empowering method because it assumes that you have the answers. It's worth trying for a wide range of problems, from chronic infections to chronic pain. It's my first choice as a mind-body approach for allergies, certain immune conditions, skin and digestive disorders, and any persistent or mysterious medical problems. Guided-imagery therapy does no harm, is time- and cost-effective, and can often be fun.

Two California physicians, Martin Rossman and David Bresler, developed this therapy and created the Academy for Guided Imagery to promote it. The Academy offers training and even home study programs in this mind-body method for medical doctors and other interested health professionals.

For a directory of qualified practitioners, contact the Academy for Guided Imagery, PO Box 2070, Mill Valley CA 94942; (800) 726-2070 or visit their website at www.interactiveimagery.com. The Academy also sells imagery-related books, tapes, and other resources which may be helpful—but are not a substitute for the guidance of a trained therapist, at least in the beginning. ●

I've had a persistent problem with nail fungus, but don't want to take prescription drugs. Can you recommend anything else?

Nail fungus, which can make your nails thick and discolored, is difficult to treat, and drug therapy can be expensive and often comes with troubling side effects. My first choice to treat nail fungus is the disinfectant tea tree oil: Paint it on the affected nails twice a day. Tea tree oil has a strong herbal smell, and you may have to use it regularly for up to a year for the nail to completely grow out and for the fungus to be eradicated. You can also try grapefruit seed extract; use it in the same way as tea tree oil. Both herbal treatments are available at health food stores.

What is considered a good trial period when seeking beneficial results from natural medicines—one, two, or six months?

In my experience, a trial of two months should be sufficient in most cases. Sometimes, though—as in the case of stinging nettle for hay fever—you will see results immediately.

I would appreciate any help you can give me concerning carpal tunnel syndrome. I work on a computer at my job and wear wrist supports whenever possible, but I still suffer from numbness and throbbing in my hands.

While a lot of doctors recommend surgery for this condition, I think the results have been disappointing, and I would suggest doing whatever you can to avoid it. An alternative that may help the problem is vitamin B-6, which I recommend taking at a dose of 100 mg twice a day for up to six weeks. Don't take more than 200 mg per day, because higher doses have produced rare cases of nerve damage, and quit taking the B-6 immediately if you develop any unusual numbness. Acupuncture and yoga may also be helpful measures to try.

To prevent recurrence of symptoms, minimize the repetitive strain that produced this injury. Consider among other things the level of your table and chair and the angle at which you hold your hands when working at the computer. Take frequent breaks to stretch out fingers and thumbs.

I'm 71 and have cataracts developing rapidly in both of my eyes. I want to avoid surgery if possible. What are your suggestions?

You can slow the progression of cataracts by following the same measures that I recommend for preventing them: Wear UV-protective sunglasses when you're out in the sun, and take the antioxidant regimen that I recommend to all my patients (see page 6). You might also reconsider cataract surgery: It's very simple now (requiring only local anesthesia) and generally works quite well. ☺

Send your health questions to Ask Dr. Weil, Self Healing, 42 Pleasant St., Watertown MA 02472. I regret that I cannot answer your questions personally.

HEALTHY LIVING

Breathwork's Benefits

The most effective and time-efficient relaxation method I know is to practice breathing exercises regularly. My patients have used these simple techniques not only to center themselves but also to address various health problems, from stopping panic attacks to improving digestion. I recently heard such a compelling anecdote that I wanted to share it here.

Patrick McGrady, director of CANHELP (a cancer-patient information service in Port Ludlow, Washington), suffered a stroke at age 64. Soon after, his life became a series of trips to the emergency room for medication and treatment. Every few months he experienced a sudden spike in blood pressure, accompanied by a feeling of dread. Then, a doctor advised him to practice breathing techniques.

Patrick learned how to do my yoga-derived Relaxing Breath (also called the "4-7-8 Breath," a reference to the number of counts you take while inhaling, holding the breath, and exhaling; see exercise below), and the results astounded him. "That simple thing would lower my blood pressure to normal within five minutes," he recalls. Patrick has now been free of these incidents for the past year, and been able to discontinue using antihypertensive drugs.

Stories such as Patrick's have convinced me that the Relaxing Breath is one of the most powerful tools to manage stress and health problems related to it. To help everyone learn this and other simple breathwork techniques, I've made a recording called *Breathing: The Master Key to Self Healing*. Listeners will first hear about the healing power of breath, and then learn eight breathing exercises. Readers of *Self Healing* can purchase this 2-CD/audiotape set, which comes with a companion study guide, by calling (888) 337-9345. ☺

The Relaxing Breath

1. Sit up comfortably and place the tip of your tongue against the bony ridge near your upper front teeth; you'll keep your tongue in this position throughout the exercise.
2. Exhale with a *whoosh* through your mouth.
3. Now close your mouth and breathe in quietly through your nose to the count of four.
4. Hold your breath easily to the count of seven. Then exhale through your mouth with a *whoosh* to the count of eight.
5. You have now completed one breath. Repeat the cycle three more times for a total of four breaths. Do not do more than four breaths at one time for the first month of practice. Over time, you can work up to eight breaths. While you may notice only a subtle effect at first, breathwork gains power through repetition and practice. Make a point to practice twice a day.

Why I Take Supplements / continued from page 1

My Antioxidant Regimen

Often in this newsletter I'll refer to my standard antioxidant regimen or "cocktail." Despite its name, this "cocktail" is no mixed drink! In fact, it's comprised of the antioxidants—vitamins A (as mixed carotenes), C, and E, and the mineral selenium—that I take every day in supplement form. I take my antioxidants at different times throughout the day to optimize absorption and effectiveness.

These vitamins and minerals work together to block the chemical reactions that generate free radicals (dangerous compounds that harm the immune system and can damage DNA) and also help destroy them. Put simply, antioxidants help safeguard your immune system, retard aging, and protect against cancer. In addition, research has shown individual antioxidants to prevent specific conditions, including cardiovascular disease, cataracts, and macular degeneration, the primary cause of vision loss among older adults.

Mixed carotenes

Why to supplement: I used to advise people to take supplements of beta-carotene, which forms vitamin A in the body, but recent research suggests that a wider range of carotenes, an entire family of red and orange pigments related to vitamin A, may have greater cancer-protective value than beta-carotene alone. You can find carotenes (also called carotenoids) in foods of these colors, such as tomatoes, cantaloupes, squashes, sweet potatoes, and carrots, as well as in dark leafy green vegetables. Taking a mixed-carotene supplement doesn't excuse you from eating these fruits and vegetables, but it's good insurance against failing to supply your body with all the dietary carotenes it needs.

How to take: I take 25,000 IU of mixed carotenes at breakfast with my vitamin C. Look for a product that contains a wide range of carotenes, including beta-carotene, alpha-carotene, lycopene, lutein, and zeaxanthin.

Vitamin C

Why to supplement: Unlike most animals, humans lack the ability to make vitamin C in their bodies and need to get it every day from dietary sources (such as citrus fruits, tomatoes, strawberries, peppers, broccoli, and leafy green vegetables such as spinach) or through supplementation.

How to take: Recent research has found that the amount of vitamin C necessary for disease prevention is smaller than once thought, and this has prompted me to lower my recommended daily dose of this nontoxic supplement: Take 100 mg twice a day with meals (for a daily total of 200 mg) to avoid stomach upset. When choosing a supplement, avoid chewable forms, which can damage tooth enamel, and very large pills, which may not dissolve completely.

Vitamin E

Why to supplement: Vitamin E is made up of eight different compounds, four tocopherols and four tocotrienols (in both cases called alpha, beta, gamma, and delta). Scientists

believe these different components are responsible for different actions in the body, from lowering cholesterol to preventing cancer. But it can be difficult to get optimum amounts of vitamin E from food alone, especially if you're eating a low-fat diet: To obtain the minimum daily dose I recommend, you'd have to consume a pound of sunflower seeds or more than 5 pounds of wheat germ.

How to take: I feel the ideal vitamin E product should provide a daily dose of 80 mg of the whole complex, including mixed tocopherols and mixed tocotrienols, and at least 10 mg of that should be tocotrienols. But such a product may be expensive and hard to find. In that case, my next best choice would be a vitamin E supplement that contains just "mixed tocopherols." When shopping for vitamin E supplements, you'll notice that there are both natural and synthetic forms. I recommend the natural form, since it's better used by the body. While some vitamin E supplements contain only alpha-tocopherol, I recommend mixed tocopherols, which include alpha and a range of other helpful tocopherols. The label should say "*d*- [not *dl*-] alpha-tocopherol with other tocopherols" or "mixed tocopherols." Adults should take 400 IU a day, but anyone 40 or older should take twice that amount (800 IU). Vitamin E is fat-soluble and best taken with a meal containing some fat.

Selenium

Why to supplement: Selenium is a trace mineral found in foods grown in selenium-rich soil. Because it may be difficult to determine whether the food you eat contains enough selenium to help prevent disease, I recommend taking this antioxidant as a daily supplement.

How to take: I take 200 mcg of selenium with vitamin E to enhance absorption. If you have had cancer or are at increased risk for it, take 300 mcg a day. I suggest you look for selenium that's labeled "organic," as this yeast-bound form is more readily absorbed than inorganic versions.

Other Important Supplements

Here are some other vitamins and minerals that you should consider supplementing with on a daily basis, if you don't already get enough from your diet.

B-complex

Why to supplement: B vitamins have been shown to reduce risk of stroke, protect against depression, and prevent birth defects. Some B vitamins, especially vitamin B-6, B-12, and folic acid, protect against elevated levels of homocysteine, an amino acid closely linked with heart disease and Alzheimer's. I take a B-complex supplement daily, and suggest my patients do so as well. While some B vitamins can be found in leafy green vegetables, others do not occur naturally in plant-based foods, which makes supplementation particularly important for strict vegetarians (vegans).

How to take: I take a B-100 B-complex supplement that contains 400 mcg of folic acid (also called folate), 100 mcg of

vitamin B-12, and other B vitamins. You can take B-complex at any time of day. Be aware that riboflavin (vitamin B-2) in the supplement will color your urine bright yellow for a few hours, which is harmless.

Calcium

Why to supplement:

Besides being necessary to build strong bones, calcium promotes healthy teeth and gums, helps to regulate nerve and muscle function, and prevents high blood pressure. Most American adults get only half of the Recommended Dietary Allowance (1,000 to 1,300 mg) of this mineral from food such as dairy products, sardines with bones, tofu, broccoli, kale, and calcium-fortified products like orange juice and soy milk, so I believe that supplementing with calcium is a good insurance policy.

How to take: Depending on your intake of calcium from your diet, I think that it's fine to take up to 1,500 mg of supplemental calcium a day. Take your calcium in two or three split doses of 500 mg each for best absorption. *Note:* To counteract calcium's constipating effects, take it with half as much magnesium, which acts as a laxative. I typically recommend that everyone—especially seniors, who may have insufficient stomach acid to absorb calcium carbonate—take calcium citrate (for example, Citracal). Calcium citrate appears to be the type best absorbed by the body.

Vitamin D

Why to supplement: Vitamin D aids calcium absorption, promotes bone health, and may play a role in the prevention of breast cancer. Keep in mind, your body naturally produces this vitamin when exposed to sunlight, but recent surveys have shown that many Americans (especially seniors) are deficient in vitamin D. Supplementation is especially important during the winter months for those who live in northern latitudes.

My Recommended Daily Supplements

Chart Key: A=Adults (ages 12 to 65) S=Seniors (over 65)

Supplement	Dosage	Additional Information
Mixed carotenes (Vitamin A)	A 25,000 IU S 25,000 IU	Mixed carotenes, containing beta-carotene, alpha-carotene, lutein, lycopene, and others. Take with a meal containing some fat.
Vitamin C	A 200 mg S 200 mg	Nonchewable forms (to protect tooth enamel). Take 100 mg twice a day with meals to avoid stomach upset.
Vitamin E	A 80 mg S 80 mg or 400 IU (under 40) 800 IU (age 40 and older)	Mixed tocopherols and mixed tocotrienols including at least 10 mg of tocotrienols. Another option is mixed natural tocopherols. Take with a meal containing some fat.
Selenium	A 200 mcg S 200 mcg	Organic, yeast-bound forms. Take this mineral with vitamin E to enhance absorption.
B-complex	A 1 capsule S 1 capsule	B-100 containing 400 mcg of folic acid, 100 mcg of B-12, and other B vitamins. Take with a meal.
Calcium	A 1,000 to 1,500 mg S 1,500 mg	Calcium citrate. Take in divided doses of 500 mg each. Because calcium is constipating, take with half as much magnesium to maintain normal bowel function. (Magnesium has a mild laxative effect.)
Vitamin D	A 400 IU S 800 IU	Basic, no-frills product. Some calcium products include vitamin D. Take with a meal.

Note: My supplement recommendations are based on the latest scientific evidence as of October 2002.

How to take: Most adults should take 400 IU daily, while seniors need 800 IU; you may be able to find supplements that combine this amount of vitamin D with calcium.

Advice for Vegetarians

Many people, including myself, consider themselves vegetarians even though they may eat dairy products, fish, or even poultry, while a true vegetarian (vegan) doesn't eat any animal products. Nutrients that are sometimes deficient in a vegetarian diet include zinc, iron, calcium, and (particularly in vegans) vitamin B-12. In addition to the supplements that have already been discussed in this article, I would also recommend that all vegetarians supplement with 30 mg of zinc per day. ●

When Herbs and Drugs Don't Mix

Many, many readers of this newsletter have written to me asking whether certain herbal supplements are safe to take with particular drugs. While data on herb/drug interactions are only now beginning to be collected systematically, I can certainly offer some common-sense advice to help you avoid possible interactions.

In general, you'll want to be careful about mixing herbs and drugs that have similar actions: For example, ginkgo has blood-thinning properties and may heighten the effects of anticoagulant drugs. Conversely, you should avoid mixing herbs and drugs that have *opposite* actions: Ephedra, for example, can exacerbate high blood pressure and may cancel out the effects of antihypertensive drugs.

Some doctors and pharmacists can offer guidance on herb/drug interactions, and some chain pharmacies now have databases to check for such interactions. Below are several possible herb/drug interactions you'll want to watch out for:

- **Blood thinners.** Many popular herbs—including garlic, ginger, ginkgo, feverfew, and bromelain—reduce the clotting tendency of the blood, thus helping to protect against heart attacks and strokes. However, taking these herbal supplements in conjunction with prescription anticoagulants such as warfarin (Coumadin) or even regular aspirin may increase the risk of excessive bleeding. A case in point: In 1997, the *New England Journal of Medicine* reported on a man who experienced spontaneous bleeding in the eye while taking both ginkgo and aspirin on a regular basis.

If you're taking an anticoagulant drug (including aspirin), I recommend using the above herbal supplements only under the supervision of your doctor, who can monitor your blood and adjust your drug dosage if necessary. (By the way, it's fine for people who take anticoagulant drugs to use garlic and ginger as *culinary* herbs: The problem is just with concentrated extracts.)

- **Antidepressants.** Numerous studies in Europe have shown St. John's wort to be an effective treatment for mild to moderate depression, but the herb appears to reduce the effectiveness of various drugs by causing them to be metabolized too quickly. St. John's wort has been found to lower blood levels of indinavir for HIV, and to affect cyclosporine for organ-transplant patients. In addition, there are concerns that the herb may interfere with birth control pills, as well as some drugs for seizures and certain cancers. I don't recommend combining St. John's wort with antidepressant drugs,

unless you are working closely with a physician to gradually wean yourself from the drug while slowly increasing your dosage of the herb.

- **Sedatives.** I sometimes recommend the herb kava as a short-term treatment for anxiety and related insomnia. Yet, I caution patients not to mix it with other depressants such as alcohol, prescription sedatives, and the herbal relaxant valerian, as kava may intensify their effects. Likewise, I think it's prudent to avoid combining valerian with other sedatives. Also, because of recent reports linking kava products with liver toxicity in some people, you shouldn't use the herb if you have liver problems or are taking any drug (such as acetaminophen) that is potentially damaging to the liver.

- **Stimulants.** Natural supplements that claim to promote weight loss, increase energy, or treat asthma and allergies often contain herbal stimulants such as ephedra, yohimbe, guaraná, yerba maté, and Asian ginseng. I would be wary of combining these supplements with over-the-counter or prescription drugs that contain stimulants such as caffeine (including Excedrin) and pseudoephedrine (usually sold as a decongestant). Taking a double dose of stimulants can cause or exacerbate anxiety, insomnia, high blood pressure, and rapid heart rate.

Also, herbal stimulants may interfere with medications that lower blood pressure or regulate cardiac arrhythmia.

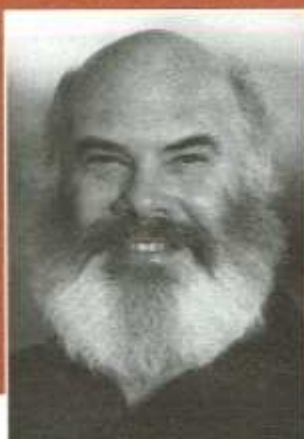
- **Immune enhancers.** It's possible that immune-enhancing herbs and mushrooms such as astragalus, echinacea, maitake, and reishi may counteract the effect of corticosteroids and other drugs that suppress immune response. If you take an immunosuppressive drug (for an autoimmune condition or to suppress rejection of an organ transplant), I would avoid long-term use of immune-enhancing herbs.

- **Laxatives.** In general, I recommend against using herbal irritant laxatives such as cascara sagrada and senna, because they lead to dependency and can deplete the body's potassium levels. It's particularly important to avoid these herbs if you're taking a prescription diuretic (for high blood pressure or excessive fluid retention), as diuretics also promote potassium depletion. Severe potassium loss can result in confusion, weakness, irregular heartbeat, and even death.

Substances that act as bulk laxatives—including psyllium, flaxseed, and triphala—don't deplete potassium levels. However, their mucilage content can slow the absorption of some drugs, so if you're taking medication, I'd suggest that you not take it at the same time of day as you take one of these herbs.

To learn more, I recommend referring to the book *Herb Contraindications and Drug Interactions* by Francis Brinker, ND (Eclectic Medical Publications, 2001). ☺

For customer service or to order subscriptions to Self Healing, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

May 2003

Dear Reader,

In May, I'll be returning to Okinawa, Japan, home of the world's largest number of centenarians (age 100 or over), where I'll be speaking at a conference for Japanese physicians.

On this trip, I'll have a traveling companion: my mother, Jenny. At age 92, she knows a thing or two about aging well, and she'll be meeting other remarkable oldsters to learn more about healthy longevity.

With Mother's Day coming up, I hope you'll share the information in this issue with the special women in your life.

Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Good Health, Period	2
Prostatitis Pointers	3
Heading Off Headaches	4
Ask Dr. Weil: Spinal Stenosis; Weight-Loss Surgery; & More	6
Beyond the Supplement Hype	6
An Aspirin a Day	7
The High Price of Vanity	8

Will Ephedra Strike Out?

The death of Baltimore Orioles pitcher Steve Bechler earlier this year has been linked in part to ephedra, an herb found in a supplement he took in hopes of losing weight and improving athletic performance. One of the supplement's main active ingredients, ephedrine, constricts blood vessels, which increases blood pressure and heart rate. As a cardiac stimulant, ephedrine is more dangerous when used under conditions of physical activity, heat, and stress—factors present when Bechler took the supplement.

Ephedra is one of the oldest known medicinal plants, used in Asia for thousands of years to treat asthma, bronchitis, and other respiratory problems. I've told some asthmatic patients to brew and drink a tea from the herb, which helps open up air passageways in the lungs. The problem today is the way ephedra is being used and sold. Products sold as dietary supplements in health food stores are combining isolated ephedrine with other stimulants, like caffeine.

To Ban or Not to Ban?

Even though the supplement industry claims that ephedra is safe and effective when used as directed, products containing it have been linked to many adverse effects, ranging from nervousness, anxiety, and insomnia to heart attack, stroke, psychosis, and death. Using ephedrine-containing supplements is especially risky if you have an underlying medical problem, such as heart disease, hypertension, or diabetes, for example. In light of ephedra's questionable safety and popularity among athletes, numerous sports organizations have banned its use, including the Olympics, professional football, collegiate athletics, and, most recently, minor-league baseball.

So far, the Food and Drug Administration (FDA) has been hesitant to ban the sale of ephedra. In 1997, an FDA attempt to prohibit sales of ephedrine-containing products that claim they aid weight loss and athletic performance and to add warning labels was thwarted by manufacturers, who argued the agency lacked enough proof of danger. But the FDA is renewing efforts to get manufacturers to remove unproven claims from product labels. Also, they're proposing a "black box" warning like those on prescription drug labels, noting ephedra's risk of heart attack and stroke.

My colleague Raymond Woosley, MD, PhD, a pharmacologist and vice president of health sciences at the University of Arizona Health Sciences Center, believes ephedra is dangerous to use without medical supervision because consumers often cannot know in advance that they are at risk for side effects. He feels the FDA should require it to be used under medical supervision and by prescription only. Recent research highlights the supplement's potential harm. One study found that although ephedra products represent less than 1 percent of all herbs sold in this country, they account for 64 percent of all adverse reactions reported (*Annals of Internal Medicine*, March 18, 2003). Another study (*Journal of the American Medical Association*, March 26, 2003) says there's little proof that ephedra is effective in promoting long-term weight loss and doubts its ability to enhance athletic performance.

I think sales of ephedra products should be regulated much more closely and consumers need to be better educated about its dangers. I support a ban on products that claim ephedra is a safe method for weight loss or helps boost energy. Neither claim has good evidence, and the risks outweigh the potential benefits. ●

Good Health, Period

Whether they call it a "friend" or "the curse," most women of childbearing age experience a monthly menstrual period as a fact of life. For some, it's a time to embrace their femininity. But for others, menstruation and the days immediately preceding it bring bloating, breast tenderness, cramps, and irritability. A smaller percentage of women have intense emotional symptoms, such as depression, anxiety, and mood swings, that are more severe than premenstrual syndrome (PMS).

Here—along with Ann Mattson, MD, a Boulder, Colorado-based ob/gyn and graduate Program in Integrative Medicine Associate Fellow, and Joanne Perron, MD, a Georgia-based ob/gyn and current Associate Fellow—I'll discuss these and other common menstrual complaints.

PMS and Beyond

Feeling cranky, tired, or sad, and due to get your period? Many women—and men—tend to chalk up such emotions to "hormones" or PMS. But researchers still haven't determined the true cause of PMS, and some doubt the condition even exists. That's not surprising: With some 150 emotional and

physical symptoms attributed to the menstrual cycle, this has created confusion about what "PMS" actually means. What's clear is that people overestimate the prevalence of PMS: In one study, women who did not keep track of their menstrual cycles and were incorrectly told their periods were due in a week developed moodiness and other PMS symptoms—even though they were not actually premenstrual. Many Americans now believe *all* women suffer from PMS.

Why the eagerness to embrace PMS? Dr. Perron believes the PMS label gives women the opportunity to be more honest about their true emotions than they would be the rest of the month: You can express anger or sadness without being held responsible because you're "PMS-ing." And Dr. Mattson points out that our society is so accepting of PMS that it's been used as an excuse for everything from sick leave to murder.

Less common but more controversial is the diagnosis of premenstrual dysphoric disorder (PMDD), which involves emotional symptoms like depression, anxiety, anger, and fatigue that occur the week before menstruation and are so severe they interfere with daily activities. Unlike PMS, PMDD symptoms are mostly emotional, and the condition is often treated with antidepressants. But women with PMDD *can* have physical problems like breast tenderness, bloating, and cramps, leading some experts to speculate that PMDD may just be a variant of PMS. There's much debate in the medical community about whether PMDD is a real condition at all: Interestingly, one study showed that both women *and* men claimed to experience the same cyclic mood changes—but only women were considered to have PMDD.

PMDD may simply be depression that worsens premenstrually. Women who have been diagnosed with PMDD but don't want to take antidepressants may benefit from lifestyle changes.

Are Tampons Toxic?

You probably know that tampons can cause toxic shock syndrome, a potentially fatal bacterial illness that can be avoided by not using "super" or higher absorbency tampons and by changing tampons regularly. Recently, researchers have voiced new concerns about these products: They believe tampons made from rayon—including most major brands—contain dioxin, a potentially carcinogenic chemical formed when rayon is produced. The Food and Drug Administration

says that tampons contain only trace amounts of dioxin, which are not a concern. Although some experts worry that even low-level exposure over time could lead to cancer and other health problems, there's currently no good evidence to support such a link. And email rumors claiming that tampons contain asbestos are absolutely false. If you're still concerned, you can use pads or find options like organic cotton tampons or menstrual cups online and at some health food stores.

Lifestyle Changes Make a Difference

Whether you have PMDD, true PMS, or suffer from just a few premenstrual woes, the lifestyle measures below—followed all month long—may help.

Diet. Research shows that women with PMS symptoms consume more sugar, refined carbohydrates, and salt in general than women without symptoms. You may crave these things, but they can also worsen symptoms like bloating, fatigue, and irritability. Meanwhile, studies suggest that eating a vegetarian diet may ease menstrual cramps and other symptoms. I recommend a diet that's high in fruits,

EDITOR: Andrew Weil, MD

PUBLISHER: David Thorne

EDITORIAL DIRECTOR: Carl Nierenberg

EXECUTIVE EDITOR: Dan Fields

RESEARCH EDITOR: Jessica Cervetani

EDITORIAL INTERN: Idalia Rychlik, Feven Teklu

MEDICAL ADVISOR: Russell H. Greenfield, MD

DESIGNER: Mary Lynch

CIRCULATION DIRECTOR: Shirley Barry

FULFILLMENT MANAGER: Devin McCloskey

KEY SERVICE COORDINATOR: Barbara Hawley

PRODUCTION MANAGER: Mandy Stone

TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's *Self Healing* (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. • Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. • This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING:

42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.

WEBSITE: www.drweilselfhealing.com

CUSTOMER SERVICE: (800) 523-3296

ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.

SUBSCRIPTIONS: US \$29/yr; Canada \$36

BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

SELF-CARE

Prostatitis Pointers

Chronic prostatitis (literally, inflammation of the prostate gland, although swelling isn't always present) can make men's lives miserable. It affects men of all ages with symptoms that may be persistent or come and go over years including pelvic pain, frequent painful urination, and sexual dysfunction. While acute bacterial prostatitis can be successfully treated with antibiotics, most men with chronic prostatitis don't have a bacterial infection. (The cause is usually unknown.) Nonetheless, many doctors treat chronic prostatitis with antibiotics, usually without success.

Fortunately, natural approaches can help. Below is my advice, with input from Mark McClure, MD, an integrative urologist in Raleigh, North Carolina.

Diet. Drink lots of water, since concentrated urine irritates the prostate. Avoid urinary irritants—alcohol, tobacco, caffeine, and spicy foods (red and black pepper, especially). Eat foods that reduce inflammation, such as antioxidant-rich fruits and vegetables, freshly ground flax seeds, and soy foods. Avoid polyunsaturated and trans fats, which promote inflammation.

Mind-body approaches. Experts now believe that many cases of prostatitis are due to chronic tension in the pelvic muscles, and stress can worsen symptoms. Practice a relaxation technique—like breath work, meditation, or yoga—each day, or try biofeedback.

Exercise. Prolonged sitting can aggravate the prostate, another reason to get at least 30 minutes of aerobic activity (like walking or swimming) most days of the week. If you cycle, use a split seat to reduce the pressure on your prostate.

Supplements. Besides a multivitamin/multimineral supplement, Dr. McClure recommends taking extra zinc: Prostatitis patients often have low levels of zinc in their prostatic fluid. (Don't exceed 100 mg of zinc daily, which may impair immunity.) Also, he advises taking 200 to 400 mg of quercetin (a flavonoid compound) 20 minutes before meals, along with 500 mg of bromelain (a pineapple enzyme). Quercetin has been shown to benefit chronic prostatitis, and bromelain improves quercetin absorption.

Other measures. Adjust your frequency of ejaculation: Too little sex makes the prostate congested, while too much can irritate the gland. (Find the frequency that's best for you.) Take sitz baths (sitting in very warm water up to your navel) for 15 minutes twice daily to ease pain. Ask your doctor about prostatic massage (which involves inserting a gloved finger in the rectum and gently pressing on the prostate) to drain the gland. ☺

For more, see Dr. McClure's *Smart Medicine for a Healthy Prostate* (Avery, 2001), or contact the Prostatitis Foundation (www.prostatitis.org; 888-891-4200).

vegetables, and whole grains and low in polyunsaturated and trans fats, which promote inflammation. Limit alcohol consumption, which can affect sleep, energy levels, and mood. And get plenty of omega-3s: These fatty acids—found in oily, cold-water fish like salmon and sardines, as well as flax seeds and walnuts—appear to ease cramps.

Taking a daily B-complex supplement and getting at least 1,200 mg of calcium a day from food, supplements, or both may also help relieve menstrual symptoms, including headaches, bloating, and mood swings.

Exercise. Regular physical activity can improve mood, relieve stress, and reduce PMS symptoms in general. I recommend getting at least 30 minutes of aerobic exercise, such as brisk walking, most days of the week. Mind-body activities like yoga and tai chi can also help ease anger and anxiety.

Stress relief. Practicing a regular relaxation technique, such as meditation or breath work, can help calm your mind and even out moods.

Best Bets for Individual Symptoms

The advice below can help relieve the symptoms most often associated with the premenstrual week and menstruation itself.

Bloating. Many women take over-the-counter diuretics to minimize swelling and fluid retention during their periods, but these products are only temporarily effective. I think a better approach is to limit your intake of salt, sugar, alcohol, and fat throughout the month, since all of these substances can contribute to bloating.

Breast tenderness. Some cases of tender breasts are easily remedied: If you've been consuming a lot of caffeine, for example, cutting back on caffeinated beverages, chocolate, and other sources can help ease soreness. Taking 400 IU of vitamin E a day also helps some women, as do birth control pills. If you have more severe breast pain and your doctor has ruled out other breast problems, Drs. Mattson and Perron suggest supplementing with 1 to 3 grams per day of evening primrose oil on a regular basis. This supplement may help by lessening inflammation, but expect to wait up to three months before seeing results.

Cramps. If you suffer from menstrual cramps, it's a good idea to start taking a pain reliever like ibuprofen a few days before your period starts to decrease blood levels of inflammation-causing prostaglandins, rather than waiting until you are already in pain. Wearable heat wraps like ThermaCare can also ease cramps. You might talk to your doctor about taking birth control pills, which are effective at preventing cramps. And some of my female patients who sip a few daily cups of raspberry leaf tea say it reduces cramps.

Migraines. Painful premenstrual migraine headaches appear to be the result of fluctuating hormone levels that cause changes in blood flow in and around the brain. They can occur in women who are prone to migraines, or simply in those who are taking birth control pills, which can affect hormone levels. If you require contraception, ask your doctor about Mircette, an oral contraceptive with doses of estrogen specially designed to prevent menstrual migraines. I would avoid common migraine triggers, such as caffeine (also see page 5). Plus, you can experiment with acupuncture, which may help prevent these headaches. ☺

Heading Off Headaches

They may seem like a minor health problem, but headaches are one of the most common reasons for missing work or school, and they account for at least 10 million doctor visits each year in this country—more than for any other pain symptom. Fortunately, both natural approaches and conventional medications can help ease the pain as well as prevent it. In this article, I'll give you my ideas on ways to contend with the two most common types of headache: migraine and tension.

If you have frequent headaches, see your doctor, who can rule out any underlying disorders such as sinus troubles, hypertension, eye problems, and TMJ syndrome. (A brain tumor is very rarely the cause of a headache.) A sudden, severe headache that's different from any headache you have had in the past requires prompt medical attention. Also, be aware that regularly using over-the-counter or prescription medication for even a few days a week to ease headache pain can cause "rebound" headaches as the last dose wears off. If you suspect this is your problem, your doctor can help wean you off your medication.

For headaches that aren't responding to treatment, consider a headache clinic. Such clinics, many at university-based medical centers, typically take a multidisciplinary approach that may include medication, natural remedies, physical therapy, and psychological counseling. Visit www.migraines.org/help for a list of headache clinics.

Taming Tension Headaches

Accounting for some 90 percent of all headaches, tension headaches typically involve a dull, steady pain on both sides of the head. It may feel as if there's a tight band around your head, and your neck and shoulder muscles may feel knotted and tense. Muscle tension—brought on by emotional or physical stress (for example, bad posture or eyestrain)—may be to blame for tension headaches, although researchers now

believe that changes in levels of serotonin and other brain chemicals also play a role.

PREVENTION To keep tension headaches at bay, I recommend the following measures:

- *Ease stress.* Your best defense against tension headaches may be to address sources of stress in your life and to practice a relaxation technique each day. Methods include breath work, meditation, progressive muscle relaxation, guided imagery, self-hypnosis, and yoga.
 - *Stay limber.* Regular exercise can help prevent muscles from tightening up. Aim for at least 30 minutes of aerobic activity (such as walking, swimming, or biking) on most days of the week. Also, stretch your neck and shoulder muscles often while working at your computer or during long trips.
 - *Check your posture.* Poor posture can put stress on your neck and shoulder muscles. Don't hold your chin down while reading, cradle the phone receiver between your ear and shoulder, or sit in one position for long periods.
 - *Get enough sleep.* Being overly tired is a common cause of tension headaches.
 - *Limit or eliminate caffeine.* Coffee, caffeinated soft drinks, and other forms of caffeine can increase muscle tension and interfere with sleep.
 - *Try alternative therapies.* If you get frequent tension headaches, I suggest exploring alternative therapies to help ward them off. My first choice would be shiatsu: In this traditional healing art from Japan, the practitioner applies firm finger pressure to specific points on the body, which can be remarkably effective at releasing muscle tension. Other options are the Trager Approach (which uses gentle rocking motions to induce states of relaxation), Swedish massage (the most common type of Western massage), cranial osteopathy (in which the practitioner applies light hands-on pressure to the head and elsewhere), biofeedback, and acupuncture.
- TREATMENT** While I don't object to my patients occasionally taking over-the-counter pain relievers to ease tension headaches, a number of other measures can also be effective. Experiment with different approaches to find out what works best for you.

- *Do the Relaxing Breath.* If you feel a headache coming on, you may be able to nip it in the bud by doing the yoga-derived Relaxing Breath exercise that I describe in my books and on my recording *Breathing: The Master Key to Self Healing*. (To order the recording, call 888-337-9345 or see the enclosed brochure.) Other relaxation methods can also be helpful.

- *Get a massage.* A neck-and-shoulder rub from a friend is a wonderful way to soothe a tension headache. If that's not possible, try giving yourself a scalp massage or rub Tiger Balm (a Chinese herbal liniment sold in health food stores) into your temples.

- *Use heat or cold.* Applying an ice pack to your forehead or the back of your neck can help ease a tension headache. Alternatively, a hot bath or shower can reduce muscle tension.

- *Take a stroll.* Some headache sufferers benefit from taking a quick walk and getting some fresh air.

- *Easy does it.* Sometimes, the simplest cure for a headache is to sleep it off or just lie down in a quiet, dark room.

Help for Cluster Headaches

These excruciating headaches occur at roughly the same time of day over weeks or months. The pain is typically felt behind or around one eye, and the eye may be inflamed and watery. Some 90 percent of sufferers are male, many of whom have a history of heavy drinking and smoking. Cluster headaches may be caused by abnormal activity in the hypothalamus, the part of the brain that controls your biological clock (which is why they may occur at the same time

of day). An Italian study found that taking melatonin (a hormone that helps regulate the sleep/wake cycle) at a dose of 10 mg each evening could help prevent headaches once a cluster period has begun. The safest and perhaps most effective treatment for an attack is inhaling pure oxygen through a mask (at a hospital or at home with a portable tank) for 10 to 15 minutes. If necessary, various prescription medications can also be used for prevention and treatment.

Managing Migraine Headaches

They're less common than tension headaches, but migraines are usually more severe. A former migraine sufferer myself (I had them as a child), I know how painful and debilitating they can be. For some, a migraine begins with an "aura," typically visual disturbances such as seeing shimmering lights or blind spots. More often, pain comes on quickly, with no warning. Symptoms such as intense, throbbing pain on one side of your head, nausea, vomiting, and sensitivity to light or noise may last from a few hours to several days.

Migraines tend to run in families, and are more common in women (hormonal fluctuations probably play a role). While the exact cause of these headaches remains unclear, they appear related to changes in blood flow through the brain.

PREVENTION Various prescription drugs—including beta-blockers (commonly used for treating heart problems and hypertension), antidepressants, and anti-seizure drugs—are often used to prevent frequent migraines, yet all of these medications have side effects. Before turning to these drugs, I suggest trying the natural approaches below (also see the box at right on supplements for migraine prevention).

- **Write it down.** Migraines can be triggered by fatigue, stress, certain foods or beverages (see below), weather changes, bright lights, strong odors, menstruation, birth control pills, and other medications. Keeping a diary of when migraines occur and what might have set them off can help you avoid your personal triggers.

- **Avoid trigger foods.** Experiment with avoiding common dietary triggers, such as chocolate, red wine, strong-flavored cheeses, processed meats (like hot dogs, bologna, and pepperoni), the flavoring monosodium glutamate (MSG), the artificial sweetener aspartame (NutraSweet and Equal), as well as fermented, pickled, or marinated foods. Also, avoid caffeine, which may increase the tendency for migraines.

- **Maintain daily schedules.** Low blood sugar levels can trigger migraines, so eat meals at regular times, and snack on healthy foods. Both lack of sleep and oversleeping can also bring on migraines, so stick to a regular sleep schedule.

- **Be active.** Regular, moderate aerobic exercise (such as walking, swimming, or cycling) can help reduce the frequency and severity of migraines. Warm up slowly, since sudden, intense exercise can actually trigger migraines.

- **Calm your mind.** Because stress is a common trigger for migraines, I advise practicing a relaxation technique like breath work, meditation, or yoga on a daily basis.

- **Experiment with biofeedback.** Using biofeedback to warm your hands by way of the mind-body connection can change the circulatory dynamics in the head that may trigger migraines. Studies in both adults and children show that biofeedback can help prevent these headaches.

- **Try acupuncture.** A recent study in Italy found that female migraine patients who received regular acupuncture treatments had fewer attacks (*Headache*, October 2002).

Supplements for Migraines

Many supplements have been shown in studies to reduce the frequency of migraines. Experiment with one or more, and see what it does for you. For any of these supplements, it may take several weeks of daily use to notice benefits. **Note:** With the exception of magnesium (and the much lower amount of riboflavin found in prenatal vitamins), I don't recommend these supplements to pregnant or breastfeeding women.

Magnesium: 400 to 500 mg*

Magnesium deficiency may play a role in migraines. Take it with twice as much calcium to counter the mineral's laxative effect. Avoid magnesium oxide, which may not be well absorbed.

Riboflavin (vitamin B-2): 400 mg*

Vitamin B-2 may help migraines by increasing energy production in brain cells. This high dose is safe, but it can be hard to find supplements that contain more than 100 mg of B-2, so you'll likely have to take multiple tablets. B-2 will turn your urine bright yellow, a harmless change.

Feverfew: 100 to 150 mg of dried leaves in capsule form*

This herb helps prevent the release of substances that dilate blood vessels in the head, among other effects. Choose a product standardized to contain at least 0.2 percent parthenolide.

Petadolex: 100 to 150 mg*

This brand-name extract of the herb butterbur may act as a preventive by reducing inflammation and spasms in blood-vessel walls.

Coenzyme Q10: 150 mg in softgel capsules*

Like vitamin B-2, CoQ10 increases energy production in brain cells. Avoid if you're taking Coumadin, as it may interfere with this drug's blood-thinning effects.

*suggested daily dosage

- **Consider cranial osteopathy.** I've found this gentle hands-on therapy to be helpful in preventing migraines, perhaps by affecting circulation in the head.

TREATMENT While nonsteroidal anti-inflammatory drugs (such as ibuprofen and aspirin) are still considered first-line treatments for migraine attacks, a newer class of prescription drugs called triptans is now widely used for migraine pain. Triptans are effective, especially if taken at the first signs of an attack, but they can cause serious side effects in people with heart disease or hypertension.

Biofeedback, relaxation techniques, and acupuncture are three natural approaches that may lessen the duration and severity of a migraine, especially if used at the attack's onset. Also, lying down in a dark, quiet room can be helpful, as can applying an ice pack or over-the-counter cooling pad to your head or the back of your neck. ☺

- **General resources:** American Council for Headache Education (www.achenet.org; 800-255-2243); National Headache Foundation (www.headaches.org; 888-643-5552).

- **Mind-body resources:** Belleruth Naparstek's guided-imagery recording *A Meditation to Help Relieve Headaches* (to order, call 800-800-8661), and Dr. Steve Gurgevich's hypnotherapy recording *Headache Relief* (to order, call 520-886-1700).

Some recommendations in this article come from Randy Horwitz, MD, PhD, a Fellow at the University of Arizona's Program in Integrative Medicine.

Weight-Loss Surgery; Spinal Stenosis; and More

Does anything eliminate garlic breath? I've found that breath mints offer little help.

The same sulfur-containing compounds that make garlic beneficial to health are also responsible for its odor. When you eat garlic, these compounds are absorbed into your lungs and escape with exhalation for up to 18 hours afterward, making it difficult to successfully banish garlic breath with mints or mouthwash. I've never found the smell of garlic unpleasant, but if it's a problem for you, try chewing on a few sprigs of fresh parsley (it contains chlorophyll, which is thought to quell the odor). Other garlic lovers say that munching on a coffee bean or sucking on a lemon can help. Perhaps the best solution is to surround yourself with others who enjoy garlic so the odor won't stand out!

Do you have any advice for treating spinal stenosis?

Spinal stenosis is a narrowing of the bony channels for nerves in the spine, which is a result of the normal aging process. Most people who have this condition are over the age of 60. When the channels become too narrow for the spinal cord and its nerves, it causes pain, numbness, and weakness in the legs and sometimes in the back. I suggest either osteopathic manipulation or acupuncture to help with the numbness and weakness. Also, a bodywork approach like the Feldenkrais Method can help you recognize and correct patterns of movement that can cause or aggravate pain.

Follow an anti-inflammatory diet that includes plenty of fruits and vegetables and favors the omega-3 fatty acids found in fish and flax seeds (which reduce inflammation) and

FOCUS ON SUPPLEMENTS

Beyond the Supplement Hype

Maybe you've seen the infomercial on television. Perhaps the brochure containing testimonials and "expert" opinion sounds convincing, or your neighbor insists this supplement changed her life. Seem too good to be true? It could be. Below I'll give you my opinions on some of the heavily hyped "natural" products that you frequently ask me about.

Apple cider vinegar: Sold as a liquid or in tablets, apple cider vinegar—made from fermented apple juice—is taken before meals to help curb appetite and speed fat burning. It's also said to relieve arthritic pain, reduce cholesterol, and fight infection. • *My advice:* There's no credible scientific evidence that apple cider vinegar will help you shed pounds or has other therapeutic benefits.

Colloidal silver: This "natural" antibiotic is supposedly effective against AIDS, anthrax, herpes, tuberculosis, and more. Although silver has antimicrobial properties, there's no good evidence that this suspension of silver particles is safer, better than, or lacking the negative side effects of prescription antibiotics. • *My advice:* I'm all for using antibiotics more discrimi-

nately, but I don't recommend using colloidal silver as a substitute for them. Long-term use of colloidal silver can lead to argyria, a permanent blue-grey discoloration of the skin.

Coral calcium: This product claims to be the secret of the world's longest-lived people in Okinawa, Japan, and is extracted from the coral reefs found there or mined from reef deposits washed up onshore. Manufacturers argue that calcium deficiency disease is linked to over 200 conditions ranging from arthritis and heart disease to gallstones and indigestion. Proponents further contend that disease and pain thrive in a more acidic environment in the body and that healthy people are more alkaline. Taking coral calcium reportedly restores alkalinity, and the supplement is allegedly 100 percent absorbable by the body, unlike other forms of the mineral. • *My advice:* There are better forms of calcium that are much cheaper. I recommend taking calcium citrate, which is the most absorbable form. I've been to Okinawa several times and know that factors such as diet, lifestyle, and social connections contribute to the health and

longevity of the people there, *not* coral calcium. In addition, your body very tightly controls its acid-alkaline balance, and there's no research indicating that coral calcium affects it.

Glyconutrients: The body can make some glyconutrients—compounds with a sugar molecule attached to them—but supposedly when stress, toxins, or poor nutrition reduce this production, the immune system weakens and disease results. Manufacturers claim that by providing your body with more glyconutrients, you have the raw materials needed to correct immune system dysfunction and promote healing of everything from asthma and cystic fibrosis to fibromyalgia and Alzheimer's disease. • *My advice:* There's not enough good evidence in humans that these supplements live up to their promises.

Tahitian noni juice: Derived from the fruit of the *Morinda citrifolia* tree, which is native to the Polynesian islands, this juice is a popular folk remedy purported to help prevent or relieve a range of health concerns from cancer, heart problems, and depression to psoriasis, hemorrhoids, and chronic inflammation. • *My advice:* I've seen little human research to substantiate the claims made for this expensive tonic frequently sold by multilevel marketers. Don't waste your money. ☐

limits fats that promote inflammation, such as polyunsaturated and trans fats. Also consider taking the herbal remedy Zyflamend, a natural anti-inflammatory available at health food stores or through online supplement retailers, to ease pain. I'd also suggest exercise to build strength and flexibility in the back muscles, such as therapeutic yoga, water workouts, and tai chi.

Because of potential complications such as infections and nerve injuries, I would only recommend surgery as a last resort for those with severe pain. Unfortunately, even with surgery, the pain may return after several years.

I'm a skin cancer survivor (melanoma). Is it safe or advisable for me to swim in chlorinated swimming pools?

I don't think it's healthy for anyone to swim regularly in a chlorinated pool, and in your case, I would suggest avoiding it altogether. The same properties that make chlorine so effective as a disinfectant also make it a toxic chemical known to redden eyes, fade swimsuits, bleach hair, and even trigger asthma-like symptoms. Chlorine not only irritates the skin, but membranes in the nose, airways, and lungs too.

Scientists don't know for sure whether swimming in chlorinated pools causes cancer, but one study has suggested a link between swimming more as a child and an increased risk of melanoma that was not fully explained by greater sun exposure. The researchers point out a possible relationship with cancer-promoting chlorine byproducts.

I don't want to discourage you from swimming because it's wonderful exercise. But I would seek out a pool that uses alternatives to chlorine, such as an ozone generator or ion purification system, or take a dip in unpolluted freshwater lakes when weather permits. Slowly, some public pools, health clubs, and Y's are shifting to these other treatment methods as concerns about chlorine's health and environmental risks grow. I've installed an ion purification system in my home pool from Sigma Water Systems. It uses a silver-copper ion generator that releases copper to kill algae and silver to wipe out bacteria, plus I also add a nonchlorine oxidizer for high bacteria counts. The system works fine as long as I don't use a copper-containing algicide. Too much copper in my water turns my beard green.

What's your dietary and supplement advice for someone who has had weight-loss surgery (Roux-en-Y bypass)?

During Roux-en-Y, which is the most popular type of weight-loss surgery, staples are used to greatly reduce the size of the stomach, and the small intestine is shortened so that much of it is bypassed. The body is then unable to absorb many of the calories or nutrients you consume. People who have undergone this operation feel full after only a few bites of food, which results in rapid weight loss but also puts them at risk for malnutrition. Carbohydrates, fats, iron, and vitamin B-12 aren't well absorbed, and the body has trouble digesting calcium-rich dairy foods. I'd only recommend weight-loss surgery for the morbidly obese after all other options (like diet and exercise) have been exhausted.

Because people who have had Roux-en-Y have difficulty absorbing many essential vitamins and minerals from their diet, they need to get these nutrients in supplement form.

An Aspirin a Day

Taking a daily aspirin may not only keep heart disease away, but according to a recent well-designed study, it may also help protect against colorectal cancer. Dartmouth Medical School researchers followed some 1,110 patients who had been previously diagnosed with precancerous colon polyps (adenomas) and who took an 81-mg "baby" aspirin, a 325-mg aspirin, or a placebo pill daily. After seven years, those who had taken either dose of aspirin had a 19 percent reduced risk of new polyps and a more than 40 percent lower risk of developing advanced cancerous lesions, compared to the placebo group. A companion study by the same researchers found that people with a history of colorectal cancer who took a 325-mg daily aspirin also reduced their risk of polyps. Aspirin may help by decreasing inflammation or reducing the DNA damage that can precede cancer. While noting that aspirin alone can't prevent all cases of colorectal cancer, the study's researchers say that people at risk for the disease might discuss daily baby aspirin therapy with their doctors. (*New England Journal of Medicine*, March 6, 2003) ●

I recommend taking a daily multivitamin that includes the fat-soluble vitamins A, D, E, and K, along with additional calcium and iron to reduce the risk of early osteoporosis and iron-deficiency anemia. Or it may be worth trying a vitamin and mineral supplement specially made for people who have had weight-loss surgery, like those from VistaVitamins (see www.vistavitamins.com for ordering information). After Roux-en-Y surgery, your body may have the most trouble absorbing enough vitamin B-12, so I advise talking with your doctor about sublingual B-12 tablets or B-12 injections.

I've read that water-only fasting can help hypertension, diabetes, and rheumatoid arthritis. What's your take?

Water-only fasting means taking in nothing but water. I've seen prolonged water-only fasting—longer than three days—produce remissions of diseases such as rheumatoid arthritis, ulcerative colitis, and asthma (when possible, medications may be phased out before the fast). However, prolonged fasting is a drastic approach that should be done only in a facility staffed by experienced health professionals who can monitor your symptoms and physical condition. (To find practitioners who specialize in fasting therapy, contact the International Association of Hygienic Physicians at <http://iahp.cisnet.com> or 330-788-0526.) Two studies have found that medically supervised water-only fasting—followed by a vegan, or strict vegetarian, diet—can lower blood pressure in hypertensives, but simpler dietary and lifestyle changes can also reduce blood pressure (see the March 2003 issue). Fasting can be dangerous for diabetics, as well as pregnant and nursing women, and I advise them not to do so. ●

The High Price of Vanity

As a health-conscious person, you're probably careful about what you put in your body. You likely don't smoke, and might limit alcohol and prefer organic produce. But there's another, less obvious, way that your body comes in contact with harmful chemicals: through your skin. According to a recent report from the US Centers for Disease Control (CDC), Americans have varying levels of over 100 synthetic chemicals in their bodies.

Although it's still uncertain what effects these chemicals might have on humans, it seems clear that many of them can be absorbed through the skin and remain in the body for long periods. Some have been linked to birth defects and other health concerns in animals, and these chemicals are now found in many cosmetics, lotions, and other personal-care products. With the average adult using seven different personal-care items each day, these findings are cause for concern.

More Than Skin Deep

Below, I'll sort fact from fiction when it comes to the safety of personal-care products, and say how to protect yourself.

Phthalates. Studies by the nonprofit Environmental Working Group (EWG) have revealed that many brands of nail polish, fragrances, deodorants, hand and body lotions, as well as hair spray, mousse, and gel contain industrial chemicals called phthalates, which are used to penetrate and moisturize the skin and make cosmetics last longer. But phthalates have also been shown to cause cancer and birth defects in some animals and sperm damage in adult men. The CDC found the highest levels of these chemicals in the bodies of women of childbearing age.

My bottom line: I recommend avoiding products that contain phthalates, especially if you're pregnant or planning to be. Despite campaigns by the EWG and other groups, the FDA still allows phthalates in personal-care products, and these chemicals aren't always listed on ingredients labels. Fortunately, you have phthalate-free options: The EWG's website (www.ewg.org) includes a report on the topic, plus a searchable database of personal-care products that tells which do and do not contain phthalates.

Sunscreens. Sunscreens are supposed to protect your health, but some researchers aren't so sure. One study suggests that two chemicals commonly used in sunscreen may have estrogenic effects, meaning they could theoretically affect reproductive and sexual health.

My bottom line: There are two types of sunscreen: Those with zinc oxide, and those containing ingredients like octyl

methoxycinnamate (OMC) and 4-methylbenzylidene camphor (4-MBC). Both types are effective at preventing sun damage, but OMC and 4-MBC are the chemicals thought to have hormonal effects. While this finding is disturbing, I believe the benefits of using sunscreen still outweigh any theoretical risks. If you're truly concerned, read labels and look for products with zinc oxide instead. (Some brands with zinc oxide include Aubrey Organics, Kiss My Face, The Body Shop, NuSkin, and Mary Kay.)

Sodium lauryl sulfate. You may have received an alarming email warning that shampoo and other personal-care products contain an ingredient called sodium lauryl sulfate (SLS). The message claims SLS is so toxic it's used to scrub garage floors and can cause cancer. Shampoo manufacturers know it's carcinogenic, the email says, but they continue to use it because it's cheap and effective.

My bottom line: This email warning is a hoax. According to the American Cancer Society and other experts, neither SLS nor its more potent cousin sodium laureth sulfate (SLES) is carcinogenic. These foaming agents are indeed used as household cleansers, but in much higher concentrations than you'd find in a bottle of shampoo or bath gel or a tube of toothpaste. SLS and SLES can cause eye irritation, allergic reactions, or canker sores—but not cancer—in some people who use them. Unless you've experienced these effects, I wouldn't worry about SLS or SLES, but if you're concerned, you can find plenty of products (at health food stores or on the Internet) without them.

"Natural" products. Orange blossom perfume, eucalyptus shower gel, and chamomile deodorant sound great, but are these products really natural? It's hard to say. The FDA claims that the word "natural" implies the ingredients are extracted directly from plant or animal products instead of being produced synthetically. But the agency doesn't regulate the use of the term, so it's easy for any product with just one "natural" ingredient—even if it's vitamin E or lanolin (made from wool)—to call itself that. An organic product must contain herbs or plants grown without pesticides, and its label must read "certified organic."

My bottom line: So-called natural personal-care products may not work any better than synthetic versions, but I prefer them because they tend not to contain dyes and toxins. Some good brands are Kiss My Face, The Body Shop, and Aveda. Although they're not necessarily free of synthetic ingredients, products that haven't been tested on animals are also a good idea. If you're a vegan, you can find products that don't contain any animal byproducts. (For a list of cruelty-free and vegan personal-care products, visit www.peta.org.)

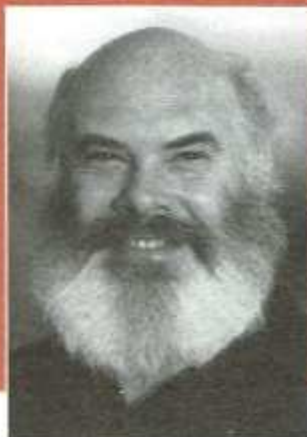
coming up

Soothe your aching back • Advice for eating disorders
Men's genital health • Irregular heartbeat • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing: Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:
www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

June 2003

Dear Reader,
I've always been fascinated by storms and have just returned from a storm-chasing trip in Oklahoma and Texas. If you've seen the movie *Twister*, then you know this unique experience involves traveling in a van to trace meteorological patterns and look for tornadoes, thunderstorms, and other severe weather.

While your summer plans may be a bit tamer, I encourage you to take the time to pursue your passions. And with Men's Health Week in June, share the article on page 2 with the men in your life.
Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Members Only: Advice on Men's Genital Health	2
No Need to Be Vein	3
Back Pain: Myths, Realities, and Remedies	4
Ask Dr. Weil: SARS, Fibrocystic Breasts, Soy Powder, & More	6
In a Heartbeat	6
Health in the News	7
Eating Disorders Update	8

Stretched to the Limit

People are getting hurt doing yoga. What was once a rarity is increasingly a reality, as droves of new yoga enthusiasts take to this low-impact activity and push themselves beyond their flexibility limits. I think one reason we're seeing more injuries is that some participants are not careful about how fast they get into a yoga practice and consider it a fitness competition. To me, this flies in the face of the true meaning of yoga. Yoga is not scored by the number of positions your body can assume. In fact, many people can master the physical aspects of yoga without making any progress toward its mental and spiritual goals.

Some say the popularity of more strenuous styles—like Iyengar and Ashtanga ("power") yoga—might be resulting in more injuries. Obviously, not everyone can bend like Gumby, but the trouble may start when participants try to keep up with others who may be more limber or more advanced in their skills. Of course, simply moving your body in ways it's not used to can cause inflammation and soreness. But when you stretch your body into a position that it's not yet ready for, your muscles and ligaments can strain, disks in the back can be injured, and joints may be damaged.

Injuries are happening not just in newcomers but in people at all levels of fitness and yoga experience. That's because yoga is so trendy it's attracting out-of-shape beginners as well as athletes whose bodies may be fit from other sports while not necessarily as pliable. But it's not just the participant who needs to avoid attempting too much too soon. Yoga instructors also need to take responsibility to ensure students don't exceed their abilities. Yet, yoga's phenomenal growth has resulted

in overcrowded classes and a shortage of experienced instructors. While yoga associations strongly recommend that instructors have at least 200 hours of training before teaching classes, there are currently no established teaching standards.

Avoid Getting Bent Out of Shape

The practice of yoga should be mindful, not mindless, explains Russell Greenfield, MD, who practices yoga and prescribes it to many of his patients as medical director of Carolinas Integrative Health in Charlotte, North Carolina. To that end, here are Dr. Greenfield's suggestions for avoiding yoga injuries:

1 Find a well-trained instructor. Ask about your instructor's qualifications: where they trained, how long they've been teaching and practicing yoga, and whether they have experience working with any health concerns you may have.

2 Seek advice. If you have a specific injury or weak spot, speak with the instructor *before* class to find out which poses to avoid and which ones might be helpful.

3 Don't push it. If you're feeling pain in a yoga pose, back off. The true spirit of yoga means there should be no judgment about your ability to perform a pose. The pose is not the end in and of itself, but a way to attain increased flexibility of body and mind.

4 Yoga is not one-size-fits-all. If new (even if you're fit), start with gentler forms such as Kripalu or Integral yoga. Work up to more strenuous forms, such as Ashtanga or Bikram ("hot") yoga, if interested. And practice what you've learned from class at home, perhaps with an instructional recording such as *Yoga for Every Body* (see the enclosed brochure). ☺

Members Only: Advice on Men's Genital Health

It has over a thousand slang names, a museum in Iceland was founded in its honor, and it's been discovered in fossils dating back millennia. It's the subject of jokes and may be the shape after which everything from missiles to minarets were modeled. It can give pleasure, inflict pain, and plays an important role in reproduction. Like any other body part, the penis is susceptible to uncomfortable problems. I'll try to answer some questions about male genital health that you may have wondered about but were reluctant to ask your doctor.

What's that spot on my penis? It could be anything! A number of conditions can result in lesions or sores on the penis, from herpes, syphilis, and other sexually transmitted diseases (STDs) to various skin problems and (rarely) penile cancer. Don't self-diagnose, and avoid sex until you've seen your doctor, who can identify the problem and treat its cause.

Can I fracture my penis? Yes, but penile fractures—technically, ruptures or tears of the tissue inside the penis—are quite rare. They occur only when the penis is erect (typically during intercourse or masturbation) and more prone to injury. When a man fractures his penis, he knows it: The injury is almost always accompanied by a snapping or cracking sound, followed by immediate sharp pain and swelling. If you're unfortunate enough to experience a fracture, get to the emergency room. Surgery, which is often successful at restoring function without long-term side effects, is your best option.

Can men get yeast infections? Yes, although they're not nearly as common as in women. Yeast infections (caused by the *Candida* fungus) aren't technically considered STDs, but they can be passed back and forth during unprotected sex. Yeast infections in men don't always have symptoms, but can cause redness, rawness, and itching of the penis (as can diabetes). If you suspect a yeast infection, your doctor can prescribe an antifungal cream. Avoid sex or use a condom with your partner until *both* of you are free of the problem.

What can I do for Peyronie's disease? This benign but distressing condition occurs when a hard, fibrous scar or plaque develops on the penis, causing it to bend, arc, or become shortened during an erection. The penis becomes less flexible, often making intercourse difficult or impossible, and erections can be painful. We don't yet know what causes Peyronie's, but it sometimes occurs after penile trauma (bumping or

bending), and is more common in men who also have Dupuytren's contracture, an inherited hardening of elastic tissue in the hands. Taking certain medications, like beta-blockers (for hypertension and heart problems), interferon (for multiple sclerosis and hepatitis), and phenytoin (an anti-seizure drug), can occasionally cause Peyronie's, too.

There's no proven cure for Peyronie's, and surgery, while often successful, can cause complications. I'd hold off on surgery, since an estimated 20 to 50 percent of men with Peyronie's eventually experience spontaneous remission of the disease. Supplemental vitamin E is sometimes recommended to prevent further scarring, but it hasn't proven successful in studies. Some of my patients have had good results with the prescription drug Potaba, a relative of the B vitamins that can slow plaque buildup. Another prescription drug called verapamil has shown promise in preliminary studies at dissolving plaque when applied to the penis in cream form. Plus, I'd try guided imagery, which might help slow or reverse Peyronie's.

Should I take Viagra? It depends. If you have been diagnosed with erectile dysfunction (ED), the "little blue pill" can help you maintain an erection by increasing genital blood flow. But Viagra can only improve arousal, not increase desire, and I don't recommend it to men without ED who are just looking to spice up their sex lives. This prescription drug can have side effects like headache, facial flushing, indigestion, and (more rarely) blurred eyesight or a temporary bluish tinge to vision. You shouldn't use Viagra if you also take the heart drug nitroglycerin, since the two drugs can interact and have dangerous side effects.

There are also nondrug options for coping with ED. This condition is often linked to restricted blood flow to the penis, so keep your heart and arteries in good shape by maintaining a healthy weight, not smoking, and eating a diet that's high in fruits, vegetables, and whole grains and low in saturated and trans fats. Regular aerobic exercise—such as brisk walking for 45 minutes on most days of the week—can improve genital blood flow and reduce the stress that can contribute to ED. If you ride a bike regularly, invest in a split seat to reduce numbing pressure to genital nerves. I'd also practice a stress reduction technique on a regular basis; options include breath

Self Healing

EDITOR: Andrew Weil, MD

PUBLISHER: David Thomas

EDITORIAL DIRECTOR: Carl Nierenberg

EXECUTIVE EDITOR: Dan Fields

RESEARCH EDITOR: Jessica Cerreto

EDITORIAL INTERN: Idalia Rychlik, Javen Teklu

MEDICAL ADVISOR: Russell H. Greenfield, MD

DESIGNER: Mary Lynch

CIRCULATION DIRECTOR: Shirley Barry

FULFILLMENT MANAGER: Devin McCloskey

CUST. SERVICE COORDINATOR: Barbara Hamway

PRODUCTION MANAGER: Mandy Stone

TREASURER: Janet A. Carlson

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Theme Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. • Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Theme Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. • This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING

42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.

WEBSITE: www.drweilselfhealing.com

CUSTOMER SERVICE: (800) 523-3296

ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.

SUBSCRIPTIONS: US \$29/yr; Canada \$36

BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

work, meditation, and yoga. (For information on herbs that may improve ED, see the February 2002 issue.)

How safe and effective are herbal products that claim to promote penis enlargement? I know of no good studies supporting the use of penis enlargement products, which range from vacuum pumps to herbal supplements to special "exercises." Vacuum pumps—originally used to treat ED—help fill the penis with blood, which momentarily makes it look somewhat larger but can damage the penis if used improperly. Most of the supplements I've seen contain yohimbe, ginkgo, and other herbs usually found in supplements for ED. They may or may not help improve sexual function, but there is no clinical evidence to suggest these herbs also increase penis size. Some websites offer to sell you exercise programs to "build penis muscle," but the penis contains *smooth* (involuntary) muscle, which can't be enlarged the way your biceps can. These exercises—which are little more than masturbation techniques—may temporarily stretch the penis, but they can't add permanent length or girth. Since penis size has little to do with satisfying a partner or producing offspring, I suggest you save your money.

Is there any way to stop premature ejaculation? This common problem affects men of all ages. There's no single definition for premature ejaculation; rather, it's simply considered to be ejaculation that occurs before it's desired. Premature ejaculation can happen before a full erection occurs, right after penetration, or before mutual gratification is achieved. My first recommendation for the problem is behavioral therapy, which typically involves the "squeeze technique," an effective method of delaying orgasm (and therefore ejaculation) that was developed by sex therapists Masters and Johnson. This technique requires the cooperation of both partners and is best learned from a qualified sex therapist. (You can get referrals from your doctor or from the American Association of Sex Educators, Counselors, and Therapists at www.aasect.org.) Another option is drug therapy with antidepressants like Zoloft, since delayed ejaculation is a common side effect of such medications. But antidepressants have a host of other side effects, including decreased sex drive, so I recommend them only as a last resort.

Should we have our son circumcised? It's up to you. There's not a compelling medical reason for the surgical removal of the foreskin of the penis, but different cultures and religions have strong opinions about the procedure. Circumcision is a ritual in faiths like Judaism and Islam, but most baby boys in Europe, Asia, and South America are not circumcised. There are some benefits to circumcision: It can help prevent infection and inflammation of the foreskin, as well as urinary tract infections, but these problems can also be avoided simply by good personal hygiene. Circumcised men may also be less likely to contract STDs, but safe sex is certainly a more important factor in reducing their transmission. If you decide to circumcise, be aware the procedure is painful: Your baby should be given a local anesthetic to numb the area first. And very rarely, complications like excessive bleeding or infection can occur after the procedure. Some parents believe circumcision is a violent and traumatic event that leaves lasting psychological damage, but there's no good evidence to support this idea. Try to look past the controversy: It's an individual choice that has no right answer. ☺

SELF-CARE

No Need to Be Vein

Summer often means trading in your long pants for shorts or a bathing suit, which I know may make people with spider or varicose veins feel uncomfortable. Yet, more than 40 percent of women in their 50s have abnormal leg veins, and some men have them, too. Weak veins tend to run in families, but they can also be the result of aging and hormonal influences, especially in women. Being overweight can stress veins, as can pregnancy. Even chronic constipation and frequent heavy lifting can cause or aggravate varicose veins.

What are they? Resembling a spider web or the branches of a tree, spider veins are small, reddish or bluish blood vessels that most often appear close to the skin's surface on the legs and sometimes on the face of fair-skinned people. Their cause is not known, but they are harmless, hard to prevent, and mainly a cosmetic problem. Varicose veins are enlarged and ropelike, and they're commonly found on the back of the calves or inside the thighs. But any vein can become varicose, or twisted, when valves that prevent blood from flowing backwards don't function properly and vein walls weaken, resulting in pooled blood and bulging. You can have both varicose and spider veins.

What can you do? Spider veins usually don't need any treatment. Neither do most varicose veins, but they can get bigger and worsen over time. Self-care measures such as wearing support hose, walking or swimming regularly, avoiding prolonged standing or sitting with legs crossed, not wearing tight clothing, and elevating your legs on a footrest or pillows might improve circulation in the legs and help reduce pain, but won't necessarily prevent the problem. If your legs become swollen, constantly itchy, or extremely uncomfortable, see your doctor, as these symptoms are sometimes associated with more serious medical problems.

Varicose veins develop slowly, so there's time to experiment with other treatments before seeking surgery. To reduce the pain or heaviness of varicose veins, I would recommend horse chestnut, an herb that appears most effective when taken orally (follow package directions). In addition, I would suggest supplementing with 200 mg of vitamin C each day along with another antioxidant like Pycnogenol (pine bark extract) or grape seed extract to further strengthen vein walls. As for surgical procedures, I would consider laser treatment for smaller varicose veins before more invasive steps such as vein stripping to remove an enlarged vein and sclerotherapy, in which saline or other solutions are injected into the vein to collapse it. But even surgical treatment is not a permanent cure, since varicose veins often return. ☺

Back Pain: Myths, Realities, and Remedies

Even though four out of five Americans will have back pain at some point in their lives, myths about the problem are widespread. Unfortunately, these misconceptions contribute to unnecessary testing, inappropriate treatment, and unwarranted pessimism about the condition. First, I'd like to put some myths to rest, then offer advice for treating acute and chronic back pain.

Myth: If your back hurts, you need an x-ray. Imaging tests such as x-rays and CT and MRI scans usually aren't necessary, since back pain has little correlation with spinal abnormalities seen on these tests, and 90 percent of people with acute back pain recover completely within six weeks anyway. In general, I don't recommend imaging tests unless you've had pain for more than three months or have symptoms of nerve compression, such as loss of bowel or bladder control, loss of sensation in the legs, muscle wasting, or weakness in the limbs.

Myth: If you have a disk problem, you need surgery. A herniated disk or other spinal abnormality doesn't necessarily cause pain. In fact, research shows that the majority of people without back pain have spinal abnormalities on imaging tests. In general, back surgery should only be used as a last resort after less aggressive measures have been exhausted.

Myth: Most back pain is caused by heavy lifting. In 85 percent of all back pain cases, the cause is unknown. I agree with John Sarno, MD, a physician and professor of rehabilitation medicine at New York University, that most back pain is the result of the mind's interference with normal nerve

Myth: Back pain only gets worse with age. The incidence of back pain is actually highest between age 35 and 55. But older adults tend to be more sedentary, a risk factor for back pain, and they're more likely to have osteoarthritis or osteoporosis, which sometimes cause or contribute to back pain.

Answers for Acute Back Pain

While acute back pain is defined as lasting less than three months, most people feel fine in a matter of days, or at most a few weeks. You can rest briefly, but then you should resume your normal activities. To ease pain, try any of the following remedies.

Cold and heat. An immediate first-aid measure is applying an ice pack for 15 to 20 minutes every hour or two until the pain begins to subside. After that, you can alternate cold and moist heat (such as a hot compress) as often as it helps. I'm not a big fan of electric heating pads.

Pain relievers. Use anti-inflammatories—like aspirin, ibuprofen, and naproxen—as directed. Acetaminophen (Tylenol) relieves pain but doesn't reduce inflammation.

Trigger-point therapy. Have a friend press around on your back looking for "trigger points"—tender spots within the region of muscle spasm. Then these trigger points can be massaged with a knuckle or with a blunt object, such as the rounded end of a pen, to release muscle tension.

Spinal manipulation. Chiropractic care, which involves hands-on manipulation of the spine, is often helpful for acute back pain, but I believe it's less effective for chronic back pain. If you haven't improved after four to six chiropractic treatments, I'd suggest stopping them and trying something else. Also, some of my patients have had good results with osteopathic manipulation for acute back pain. For a list of osteopathic physicians (DOs) in your area, send \$5.00 and a self-addressed, stamped envelope to the American Academy of Osteopathy, 3500 DePauw Blvd., Suite 1080, Indianapolis IN 46268-1136.

Acupuncture. I've found that acupuncture treatments can be effective for acute back pain, presumably by causing the release of endorphins, the body's natural painkillers.

Homeopathy. Experiment with *Arnica*, a homeopathic remedy often used for aching muscles and joints. It's sold in health food stores in pill form or as a topical ointment; follow package directions.

Exercise. After pain subsides, begin a well-rounded exercise program (see page 5) to prevent back pain in the future.

Coping with Chronic Back Pain

People with chronic back pain (lasting for more than three months) account for only about 5 percent of those with back problems, but these individuals can suffer mightily. My main advice is to read one or both of Dr. Sarno's books, *Healing Back Pain* (Warner, 1991) and *The Mindbody Prescription*

The Tobacco Connection

You know smoking harms your heart and lungs, but you may not know that it's also bad for your back. Numerous studies show that smokers are more likely to suffer back pain than nonsmokers. Nicotine may damage the lower back by decreasing blood circulation and reducing the flow of nutrients to joints and muscles. Also, smokers are more prone to coughing, which stresses back muscles. While quitting smoking may not eliminate back pain, doing so may well help and will certainly benefit your overall health.

functioning and blood circulation to muscles, a condition he calls tension myositis syndrome (*myositis* means inflammation of muscles). Sarno believes back pain is often a defensive mechanism: The unconscious mind may distract you from uncomfortable emotions by keeping back muscles in spasm. So I'd try to understand the emotional factors that may be causing your muscles to spasm.

Myth: Bed rest is key to recovery. Not so long ago, doctors advised one to two weeks of strict bed rest for acute back pain. Now we know that prolonged bed rest delays recovery by stiffening and weakening muscles. Stay in bed for no more than a day or two if absolutely necessary.

6 Back Basics for Daily Living

Proper body mechanics can help prevent back problems or a recurrence of back pain. I suggest following the tips below and getting regular exercise to keep your back healthy.

Sitting. Usually, sitting is the worst position for people with back pain. Use a chair with good lower back support, or place a back pillow or firmly rolled towel in the small of your back to maintain its natural curve. Avoid slouching by keeping your head up, pelvis tilted slightly forward, knees comfortably apart, and heels on the floor. Take frequent breaks to get up, stretch, and walk around. Men, take note: Sitting on a thick wallet in your back pocket can stress your back.

Standing. Stand tall, keeping your head, neck, shoulders, and torso aligned. If you stand for long periods, alternate placing your feet on a low stool to take some of the load off your lower back.

Sleeping. Lie on your back, knees bent, with a pillow under them, or on your side, knees bent, with a pillow between them—both

positions relieve pressure on your disks. Use a firm mattress.

Lifting. Keep your legs apart, back straight, and stomach muscles tight, and be sure to bend at your knees as you lift, not your waist.

Driving. Move the seat as far forward as is comfortable to avoid leaning forward, and adjust the seat's angle so you sit as erect as possible. You can also use a pillow to support your lower back. For long rides, stop and walk around every hour or so.

Styling. Wear properly fitting shoes with a low heel, since both high heels and ill-fitting shoes can cause back problems. Women should wear properly fitting bras: Bras that are too tight around the chest or over the shoulders can restrict blood flow to the spine. Keep shoulder bags light to prevent neck pain, or use a backpack.

(Warner, 1999), and see if his arguments ring true for you. Like Dr. Sarno's patients, you might find that simply recognizing you have tension myositis syndrome eases your back pain. In addition, you can try any of the following approaches to strengthen the back, reduce muscle tension, or relieve stress.

Exercise. Weak, inflexible back muscles are more prone to injury and strain, and there's strong evidence that regular exercise can help chronic back pain. Aerobic exercise—like walking, swimming, or cycling—can strengthen your back muscles and help you to maintain a healthy weight (excess pounds put extra strain on your back). I advise gradually working up to 30 minutes of aerobic activity at least three days a week. If you cycle, adjust your seat and handlebars to maintain a more upright posture. Check with your doctor before doing activities that put major twisting forces on the spine (such as rowing and some types of aerobic dance), or that involve forceful contact or falling (such as the martial arts and downhill skiing).

Also, I suggest doing strength-training exercises at least twice a week to firm up muscles that support your back, including those in your abdomen, legs, and buttocks. Weight machines tend to be safer than free weights because the machines limit your range of motion, but get proper instruction before doing any type of weightlifting. And I recommend daily practice of mild stretching or yoga to improve

flexibility. For more on stretching and strengthening exercises, see *Healing Back Pain Naturally* by Art Brownstein, MD (Pocket Books, 2001).

Yoga. I've found this ancient practice to be very effective for chronic back pain. The stretches used in yoga can strengthen the back, promote flexibility, and also reduce muscle tension. Choose a yoga teacher who is experienced in working with back-pain sufferers. To locate a therapeutic yoga instructor, call the International Association of Yoga Therapists at (530) 474-5700. A useful book on yoga for back pain is *Back Care Basics* by Mary Pullig Schatz, MD (Rodmell Press, 1992). As for videos, check out *Back Care Yoga for Beginners* with Rodney Yee, and *Yoga: Freedom from Back Pain* with Lillah Schwartz; both of these are available from yoga supply companies.

Mind-body work. Besides reading Dr. Sarno's books, you'd do well to practice a relaxation technique on a daily basis. Regular practice of mindfulness meditation has been shown to benefit chronic pain patients, including those with low back pain. Other options include breath work, progressive muscle relaxation, guided imagery, biofeedback, and hypnotherapy. Consider listening to Dr. Steve Gurgevich's hypnotherapy audiobook *Lower Back Healing*; to order, visit www.tranceformation.com or call (520) 886-1700.

Massage. In one study of people with chronic back pain, those who received up to 10 massages over 10 weeks reported more improvement in their pain and disability than those receiving an equal number of acupuncture treatments or self-care educational materials. One year later, the massage group had used the least pain medication. Researchers

speculate that hands-on manipulation of muscles and soft tissues may reduce pain sensation and improve mobility (*Archives of Internal Medicine*, April 23, 2001).

Bodywork. Besides massage, I've found that other bodywork methods can relieve chronic back pain. Practitioners of either the Alexander Technique or the Feldenkrais Method can help you correct faulty postures and ways of moving that may cause or aggravate back pain. Another useful method is Bonnie Prudden Myotherapy, a form of trigger-point therapy that uses manual pressure to release muscle tension. To locate a practitioner, contact Bonnie Prudden Pain Erasure at www.bonnieprudden.com or (800) 221-4634.

Electrical stimulation. Two methods of electrical nerve stimulation can be helpful for some people who suffer from chronic back pain, perhaps by blocking pain signals from reaching the brain. Patients using transcutaneous electrical nerve stimulation (TENS) receive low-level electrical pulses via electrodes placed on the lower back. TENS is used by some physical therapists, but most often the patient uses a portable device at home. Meanwhile, a newer version called percutaneous electrical nerve stimulation (PENS) delivers these pulses through tiny needles inserted in the back, and may be more effective than TENS at easing chronic back pain, according to one small study. If interested, see if PENS is available at a medical center near you. ☺

SARS; Fibrocystic Breasts; Soy Powder; and More

Should I be concerned about catching SARS? How can I protect myself?

As we go to press, there have been few cases of severe acute respiratory syndrome (SARS) in the United States, and the risk of contracting it here appears extremely low. That being said, much about this new disease remains unknown, although it's apparently caused by a new strain of coronavirus, a group of viruses that ordinarily cause nothing worse than a cold. Since SARS emerged in China last November, it's appeared in dozens of countries.

The rapid spread of SARS in our interconnected world offers one more reason to follow my usual advice for preventing infection and maintaining optimal immunity: Wash your hands frequently, eat right, take a good multivitamin,

get enough rest and relaxation, be physically active, and consider taking immune-enhancing natural products like the herb astragalus or Asian mushrooms.

Plus, I'd advise against unnecessary travel to areas hard hit by SARS. If you're in such an area, limit close contact with large numbers of people, and consider wearing a surgical mask when you're around someone who may have SARS. I'd also wash hands with alcohol wipes if you touch infected people or objects touched by them. In addition, Yoon-Hang Kim, MD, MPH, a Fellow at our Program in Integrative Medicine who has family and friends in Hong Kong, suggests that people who must travel to affected areas take two supplements on a preventive basis: Cold Away from Health Concerns, and Host Defense from New Chapter. Cold Away contains Japanese honeysuckle and other Oriental herbs believed to

INTEGRATIVE MEDICINE

In a Heartbeat

If you're falling in love, it may seem as though your heart is skipping a beat. But true cardiac arrhythmias (abnormal heart rhythms) can range from harmless to life-threatening. The most common types are single "skipped beats" (actually premature contractions of the heart's lower chambers) and short runs of unusually rapid but regular beats. These can be upsetting but are typically benign and don't require treatment. You can help control them by reducing stress and by eliminating caffeine and other stimulants.

Another common but more serious arrhythmia is atrial fibrillation (AF), in which the heart's upper chambers contract rapidly and chaotically. Often caused by an underlying heart condition or an overactive thyroid, AF quadruples your risk of stroke (from blood clots that form in the heart and travel to the brain), so it generally requires treatment with anticoagulant drugs.

If you have frequent arrhythmias, see your doctor, who may suggest an electrocardiogram or other diagnostic test. If an episode of arrhythmia causes shortness of breath, chest pain, or dizziness, get to an emergency room for possible treatment. For persistent

severe arrhythmias, treatments include anti-arrhythmic drugs, implanted defibrillators, pacemakers, radiofrequency ablation, and heart surgery.

Help for Arrhythmias

Whether you have benign arrhythmias or need medication, the steps below may reduce arrhythmia frequency (don't change your drug dosage without your doctor's supervision). Some tips are from Brian Olshansky, MD, director of cardiac electrophysiology at the University of Iowa.

Limit triggers. Caffeine, alcohol, and tobacco can all trigger arrhythmias, as can illegal drugs like cocaine and marijuana. Avoid stimulant herbs like ephedra, guaraná, kola nut, yerba maté, and yohimbe. There's also speculation that *Ginkgo biloba* may exacerbate arrhythmias. Over-the-counter and prescription drugs can also contribute to arrhythmias, like cough and cold medicines, diet pills, and various cardiac medications. If you're taking a drug that may cause arrhythmias, ask your doctor about a substitute drug.

Relax. Stress-reduction techniques can help stabilize arrhythmias. Practice the Relaxing Breath exercise (see my books) at least twice a day. Consider taking up meditation. Also, biofeedback training can benefit palpitations.

Exercise appropriately. Regular, moderate aerobic exercise (like walking, swimming, or cycling) is an excellent cardiac conditioner and can help modulate heart rhythm disturbances. Yet, exercise can also trigger arrhythmias in some cases. Ask your doctor about appropriate exercise, especially if you have a more serious arrhythmia.

Eat right. Severe fluctuations in blood sugar levels can affect your heart rhythm. Limit refined sugar and boost dietary fiber to moderate your blood sugar levels. Also, eat lots of fruits and vegetables to up your intake of magnesium and potassium, minerals that may help prevent some arrhythmias.

Take supplements. Besides getting magnesium from food, I suggest supplementing with it as a preventive. Take 500 mg of magnesium twice a day, plus an equal dosage of calcium to counter magnesium's laxative effects. (Magnesium glycinate is well absorbed and has less of a laxative effect.) Particularly if you have underlying heart disease, you might also try other supplements that may help prevent arrhythmias, including omega-3 supplements (at a dose of 1 gram of EPA and DHA combined per day), Coenzyme Q10 (100 to 300 mg), and L-carnitine (3 grams). Try one at a time, and tell your doctor what you are taking, since some of these can interact with Coumadin or other drugs. ☺

act against respiratory infections; it's sold only to health practitioners, but you can locate one by calling (800) 233-9355. Host Defense contains various immune-enhancing mushrooms; it's available in natural food stores. Dr. Kim believes these products may offer some protection, although there is still no research demonstrating that these or other supplements prevent or treat SARS.

Likewise, there is no proven drug treatment for SARS, although most patients get better on their own in about a week. Scientists are now testing antiviral drugs and herbs in search of an effective treatment. For the latest on SARS, visit www.cdc.gov/ncidod/sars and www.who.int/csr/sars/en.

What can women do to prevent fibrocystic breasts? Do they eventually lead to breast cancer?

Fibrocystic breast changes, also known as chronic cystic mastitis, are noncancerous lumps in the breast that are often tender or painful. These usually round lumps are typically found in both breasts and move around beneath the skin when you press on them. They often worsen shortly before menstruation begins, because the breasts are undergoing hormonal changes and are retaining fluid during this time.

Because fibrocystic breasts are caused by a hormonal response, they can't be prevented, but dietary measures may help ease the pain. Caffeine appears to exacerbate fibrocystic breasts, so eliminate all sources of it. I also suggest reducing your salt intake and limiting fatty and fried foods to help reduce fluid retention. Eating good sources of omega-3 fatty acids such as cold-water fish or ground flax seeds will help reduce inflammation. Supplementing with 800 IU of vitamin E daily along with 500 mg of either black currant oil or evening primrose oil (found at health food stores) may ease premenstrual breast tenderness. As for breast cancer, there's little research to suggest a link between the disease and fibrocystic breasts, but we do know that fibrocystic changes make mammograms harder to read. If you notice that one of the lumps is firmer and feels different from the others, see your doctor, who may recommend a biopsy.

What do you know about Wilson's syndrome?

Wilson's syndrome is mostly diagnosed by alternative practitioners and is widely dismissed by conventional physicians. The condition—which was “discovered” in 1990 by a doctor whose license has since been revoked—supposedly stems from low thyroid function, even though patients typically test normal in blood tests. The diagnosis is made if a person's body temperature averages lower than 98.6 degrees Fahrenheit, and its some 37 “symptoms” include everything from fatigue and irritability to allergies, hair loss, and “low ambition.” Wilson's syndrome is typically treated with the hormone drug triiodothyronine (T3) and various dietary supplements.

I would be very suspicious of a diagnosis of Wilson's syndrome. First, research shows that most people don't usually have a body temperature of 98.6 degrees, so an average reading that's a bit lower doesn't mean anything. And while some symptoms of Wilson's syndrome are indeed signs of true hypothyroidism, many of them are vague enough to be attributed to any number of other conditions, such as

Big News about Cancer

We've long known that being overweight isn't healthy, but recent research has now definitively linked excess pounds to an increased risk of cancer. In the largest study of its kind, researchers with the American Cancer Society followed almost one million cancer-free men and women for 16 years. At the end of the study, people who were overweight or obese had a higher risk of dying from cancer than those of normal weight. In both men and women, extra weight was linked to higher rates of death from cancer of the esophagus, colon, rectum, liver, gallbladder, pancreas, and kidney, as well as from non-Hodgkin's lymphoma and multiple myeloma. Heavier men also had a greater chance of dying from stomach or prostate cancer, while overweight women were more likely to die from cancer of the breast, uterus, cervix, and ovaries. Although it's still unclear why excess pounds contribute to cancer, researchers point out that extra body fat raises levels of insulin in the blood and estrogen in women, which can both cause cancer cells to multiply. (*New England Journal of Medicine*, April 24, 2003)

Comment: I think that this study gives overweight Americans one more reason to shed pounds, especially since researchers say losing weight could prevent about one out of every six deaths from cancer each year. ●

depression, anxiety, stress, and even life itself. According to the American Thyroid Association, there's no scientific evidence to support the existence of Wilson's syndrome, and treatment with high doses of T3 may be dangerous. (By the way, Wilson's syndrome shouldn't be confused with Wilson's disease, a rare, inherited, and potentially fatal disorder of copper metabolism that requires conventional treatment.)

You didn't mention soy protein powder in your recent article on soy (March 2003). How do you feel about this product? I often have a soy protein shake for breakfast.

Soy powders are typically made into shakes or added to juice, and I put them in the same category as soy supplements. I've found that soy powders often contain far higher levels of isoflavones than whole soy foods. Isoflavones are the estrogen-like compounds that account for some of soy's beneficial effects. While most experts agree that just a couple of servings of soy each day will provide health benefits without negative effects, at least one popular brand of soy protein powder has 180 mg of isoflavones per serving, about the equivalent of six daily servings of soy. Since we don't yet know the long-term safety of regularly consuming such high levels of isoflavones, your best bet is to get moderate amounts of them by enjoying one or two daily servings of whole soy foods, like tofu, tempeh, or soy milk. I think an occasional soy protein shake is fine, but I wouldn't drink one every day. ●

Eating Disorders Update

When most people think of eating disorders, they imagine emaciated young women like musician Karen Carpenter and gymnast Christy Henrich, both of whom died of complications from anorexia. But the face of eating disorders is changing: Conditions like anorexia and bulimia affect women and men of all ages and ethnicities. While female teens and twentysomethings still make up the majority of cases, eating disorders are on the rise in men and middle-aged women as well. They're also common in thin athletes like gymnasts, figure skaters, runners, jockeys, and ballerinas, or those who have to drop weight to qualify for matches like wrestlers, as well as in professions that place a higher value on appearance, such as models and actresses.

A common question from people unfamiliar with eating disorders is, "Why don't they just eat?" Although anorexia and bulimia involve issues about food, they're more complex than that. In these two most common types of eating disorders, people use food as a way to gain control over their lives, relieve stress, or boost low self-esteem. Anorexics tend to be perfectionists who see themselves as fat—even though they are usually dangerously underweight—and severely restrict their food intake, sometimes eating as little as an apple slice each day. Unlike anorexics, bulimics don't always appear thin. Rather than starving themselves, they relieve stress by engaging in a vicious cycle of bingeing on large amounts of food and then feeling guilty and trying to rid themselves of calories by vomiting, exercising excessively, or using laxatives. Bulimics tend to lack impulse control and may also abuse drugs or alcohol, shoplift, or be sexually promiscuous. Both anorexia and bulimia can have devastating long-term effects on the body, from osteoporosis to heart problems. Anorexia is especially difficult to treat and may be fatal.

What We Know Now

Although we still have a lot to learn about eating disorders, researchers have discovered quite a bit since anorexia and bulimia—once relatively rare—have become more prevalent over the past several decades. Here's what we know so far:

There's no single cause. Researchers believe that eating disorders may result from a mix of genetics and environment. Girls with anorexic or bulimic mothers or sisters are themselves more likely to have eating disorders, and they may also be more likely to have a history of sexual abuse, being teased, dieting, depression, or anxiety. Plus, the media may play a role: One study in Fiji found eating disorders in women skyrocketed after Western TV shows came to the island; before

TV, the ideal Fijian female body type was plump. If you're a parent, set a good example by maintaining a normal weight and healthy eating habits yourself, refrain from criticizing your own appearance or that of others, and teach your children how to recognize the unrealistic body images put forth by TV, movies, and magazines.

Early treatment is best. Because eating disorders are potentially fatal—some patients die of heart or kidney failure, while others commit suicide—they require professional treatment, usually a multidisciplinary approach that includes psychotherapy, nutritional counseling, and sometimes antidepressants. The sooner eating disorders are treated, the better chance for recovery. But patients with anorexia in particular can be resistant to treatment, denying they have a problem, and there's a high relapse rate. If you have a child or relative with anorexia or bulimia, seek out professional care and attend family therapy to learn how you can help them.

No one is immune. Once the diseases of white, upper and middle class teenage girls, eating disorders are increasingly common in boys, men, people of color, and older women. It's not yet clear why, but experts suspect that males and minorities may now be more likely to seek treatment than in the past. And researchers believe the rise in eating disorders among 40- to 50-year-old women may be linked in part to the anxieties of midlife, such as divorce, parental deaths, menopause, and the wish to look younger.

Integrative approaches can help. Eating disorders don't lend themselves to self-care alone, but some measures can complement professional treatment and may help prevent a relapse if you've recovered. Touch and movement therapies help people get in touch with and learn to appreciate their bodies, and can be quite beneficial for eating disorders. For example, studies have found less anxiety, better body images, and higher self-esteem in patients with eating disorders who practice the Feldenkrais Method, a type of bodywork that uses subtle exercises to re-educate the brain and nervous system to learn new ways of moving. I know of eating disorder patients who have improved by exploring dance/movement therapy, which combines learned and spontaneous movements. And a weekly massage may reduce stress and increase satisfaction with your body: Research shows that both anorexics and bulimics who receive regular massages in addition to psychotherapy have less anxiety and depression and better body images than those only receiving counseling. ☺

For more, contact Anorexia Nervosa and Related Eating Disorders, Inc. (www.anred.com), or the Harvard Eating Disorders Center (www.bedc.org).

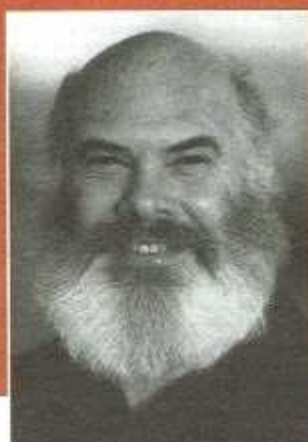
coming up

Integrative cancer care • Using alcohol wisely • Natural summertime remedies • Endometriosis • And much more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing*; *Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:
www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

July 2003

Dear Reader,
I'll be spending July on what I'll call a writing vacation. While vacations are usually meant to be a break from work, I have a deadline at hand. So, I'll be in Canada working on my upcoming book on aging, and where the summer temperatures will definitely be cooler than on my Arizona ranch.

But it won't be all work and no play. I intend to swim, walk, and even fit in some kayaking. Enjoy your favorite outdoor pursuits this summer, and see the article on page 7 for some sun-protection tips and summertime remedies.

Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Alcohol: Weighing the Risks and Benefits	2
Bread Winners	3
Taking an Active Role in Your Cancer Care	4
Ask Dr. Weil: Rhodiola; Speeding Bone Healing; and More	6
Health in the News	6
Fun in the Sun	7
Easing Endometriosis	8

Something's in the Air

Air pollution isn't good for you. I think the only question is: How unhealthy is it? According to the latest State of the Air report from the American Lung Association, pollution hasn't improved much lately: Half of Americans live in areas with less-than-ideal air quality. Environmentalists worry that air quality may further deteriorate since federal Clean Air standards have recently been relaxed. I know physicians are already seeing the consequences of breathing polluted air. (See www.scorecard.org for localized information on pollution.)

In cities especially, ozone levels increase when the air is still, temperatures are warm, and the sun is bright, making May through October some of the worst months for smog and air quality. On bad air days, pollution can sting the eyes and clog the nose, and trigger coughing, wheezing, or chest tightness.

Implications Beyond the Lungs

It makes sense that air pollution can harm your lungs and respiratory system and influence conditions like asthma and lung cancer. What you may not know is that it can also take a toll on your cardiovascular system and other parts of the body. Research has linked air pollution with an increased risk of death from heart attack and ischemic stroke. It seems that regular exposure to pollutants can contribute to oxidative stress and promote blood clotting, which over time can elevate blood pressure and restrict blood flow to the heart and brain.

There's some evidence that diabetics may be more vulnerable to pollution. On days when the air has high levels of particulates—tiny irritants that go deep into the respiratory tract—diabetics are twice as likely to be hospitalized

for cardiovascular problems, for reasons that are not entirely clear. Even male fertility could be affected: In an Italian study, male toll collectors who were regularly exposed to traffic pollution had reduced sperm quality. Allergies are also expected to rise. Burning of fossil fuels is a main source of greenhouse gases that may contribute to global warming. Such climate changes are boosting carbon dioxide levels in the air, which, in turn, are increasing growth of ragweed and other allergenic plants, driving up pollen levels, and causing more hay fever.

If air pollution can damage the lungs of adults and the elderly, imagine its potential dangers to children, whose airways are still developing. In the short term, children living in highly polluted areas are showing higher rates of asthma, bronchitis, and earaches. And a study found that youngsters living in the smoggiest California cities had reduced lung function compared to kids in cleaner locations, which could increase their odds of having chronic respiratory disease later in life.

My bottom line: I recommend trying to limit your exposure to pollution, by paying attention to air advisories and not exercising outdoors when ozone levels are high. Having indoor plants and installing high-efficiency particulate air (HEPA) filters may improve your air at home. Get antioxidants, particularly vitamin C, from supplements or a diet rich in fruits and vegetables to help detoxify the body and protect against toxic injuries. If you are often exposed to polluted air, consider taking New Chapter's Smokescreen, an herbal product that may help your body neutralize airborne toxins. Consider driving less and urging your legislators to enact tougher anti-pollution regulations and make a real commitment to alternative fuels. ☺

Alcohol: Weighing the Risks and Benefits

Alcohol is the oldest and most popular psychoactive drug in the world, and some societies learned to make it even before they had a written language. Alcoholic beverages are a part of many rituals, from champagne toasts at weddings and beer at ballgames to eggnog during the winter holidays and martinis at business lunches. So it's no wonder that many people are pleased to learn of alcohol's potential health benefits—from preventing heart disease to protecting against dementia—which have been widely publicized over the past decade. But alcohol can also be very toxic—in fact, it can be a deadly poison in higher doses. I'll discuss the latest research on alcohol, help you weigh its pros and cons, and offer advice for recognizing alcohol abuse in yourself and others.

Research Worth Toasting?

Could that glass of wine stave off a heart attack? Will a bottle of beer protect your memory? Possibly, according to recent studies. Thirty years ago, US health officials suppressed evidence showing a link between alcohol consumption and a reduced risk of heart disease, concerned that the information would only add to this country's alcohol abuse problem. Now, such findings appear regularly on the front page of the newspaper and the nightly news. Research has found that moderate amounts of alcohol are best: That's no more than

one drink a day for women under age 65, no more than two for men under age 65, and no more than one daily drink for anyone over 65. One drink is defined as 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of spirits (hard liquor). And studies reveal that different types of alcohol—beer, wine, and spirits—may be equally beneficial, suggesting that alcohol itself, rather than just the antioxidant compounds in red wine, for example, may be responsible. In other words, while some studies have found heart-protective effects in antioxidant-rich substitutes like purple grape juice, it's unlikely that such beverages can offer the exact same benefits as red wine or other types of alcohol.

The majority of studies on alcohol and heart health show a definite beneficial link. People who regularly drink moderate amounts of alcoholic beverages generally enjoy up to a 50 percent lower risk of cardiovascular disease, heart attack, type 2 diabetes, ischemic stroke (caused by a blood clot), and dementia than those who don't drink alcohol. It's still unclear why, but researchers suspect that alcohol helps the cardiovascular system by raising levels of HDL ("good") cholesterol and thinning the blood, which reduces your odds for atherosclerosis. Plus, alcohol may lower blood levels of C-reactive protein, a compound recently linked to a greater risk of heart disease when levels are elevated. There's also some evidence that regular, moderate consumption of beer may reduce the risk of kidney stones in men.

Cooking with Alcohol

I cook with alcohol more than I drink it, because I find that wine, rum, and other spirits can add to the flavor of dishes from stews to desserts, without causing any intoxicating effects. Some alcohol burns off in the cooking process, depending on the cooking method and time. For those wishing to avoid alcohol altogether—such as recovering alcoholics—there are plenty of nonalcoholic beverages that can be substituted in recipes. Try nonalcoholic wine in place of regular wine, for example, or alcohol-free vanilla extract instead of rum. For more on cooking with alcohol and appropriate substitutes, see <http://homecooking.about.com> or www.cooksrecipes.com/tips/alcohol-substitutes.html.

Alcohol Isn't for Everyone

I've never been a big drinker, mainly because I don't like the intoxicating effects of alcohol. I limit myself to an occasional glass or two of high-quality (*daiginjo*) saké, a Japanese rice wine that's fermented differently from other alcoholic beverages and seems to cause less intoxication and no hangover. Even though I'm aware of the potential health benefits of moderate alcohol consumption, I won't start drinking regularly to get them. That's because alcohol consumption also carries significant risks. There are the obvious problems and dangers, from hangovers to car accidents to alcohol poisoning, which can be fatal. But alcohol's negative effects can often be subtler. For example, three or more drinks a day

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Cari Nicenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERNS: Jennifer Coie, Maggie Cramer, Idalia Kychlik
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamway
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. • Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. • This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING:
42 Pleasant St., Watertown MA 02472.
Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 523-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

can raise your risk of high blood pressure and hemorrhagic stroke (when a blood vessel bursts inside the brain), while as few as two daily drinks can increase the risk of hip fractures and liver disease. One daily drink can increase the likelihood of esophageal cancer and breast cancer (which increases with each additional drink a susceptible woman consumes). And alcohol can add extra calories to your diet, making it harder to control your weight.

With so many effects, it's clear that alcohol can be a double-edged sword. So what should you do? First, consider how much you currently drink. If you don't now drink regularly, don't start. There are plenty of ways to protect against cardiovascular problems without imbibing, including eating a healthy diet, getting enough exercise, not smoking, and managing your weight. Women who are pregnant or nursing, or who are at higher risk for breast cancer, shouldn't drink. I also recommend abstaining if you're prone to depression or other mental illness, or if you have liver disease, gastrointestinal problems, or a personal or family history of alcoholism or other addictions. Some people can even be allergic to compounds in wine or other alcoholic beverages, so you may want to avoid drinking if you experience coughing, wheezing, hives, or chest tightness after imbibing, or if you find that alcohol triggers asthma attacks. For reasons that are still unclear, alcohol, especially red wine, can also cause migraines or other headaches in susceptible people. Seniors need to be particularly careful when drinking, since tolerance for alcohol decreases as you age, and because alcohol can interact with a number of over-the-counter and prescription medications taken by older people. And of course, you shouldn't drink if you plan on driving or operating heavy machinery.

Who *can* drink? Some research suggests that the benefits of moderate drinking may only outweigh the risks in men over age 35 and women over age 55. But most experts agree that people who currently drink moderate amounts of alcohol and are at high risk for cardiovascular disease may benefit the most. Plus, people who are healthy and already enjoy moderate amounts can continue to do so. Be sure to discuss your alcohol consumption with your health practitioner, who can help you weigh its individual risks and benefits.

Recognizing Signs of Dependency

Alcohol is clearly addictive, but how do you know if you or someone you love has a problem with it? According to the American Psychiatric Association, there are varying degrees of alcohol addiction. An alcohol abuser, for example, continues drinking even when it begins to cause problems at work, school, or home. Alcohol dependency (alcoholism) is more severe, marked by an increased physical tolerance to alcohol, withdrawal symptoms from it, and the inability to control intake. Both situations are troublesome. If you recognize these problems in yourself or others, get help (a good place to start is an alcohol treatment program or support group like Alcoholics Anonymous). Alcohol addiction can mimic certain health problems—like balance difficulties and forgetfulness—especially in older people, so be on the lookout for these symptoms in seniors. And, regardless of how much you drink, I think it's a good idea to limit yourself to at least two alcohol-free days each week to avoid dependence. ☺

NUTRITION

Bread Winners

like whole-grain "peasant" breads that have a dense, coarse, and chewy interior—not the fluffy, squishy loaves made from refined flours, whether white or wheat. And I prefer bread with whole or cracked grains in it that doesn't have a homogeneous texture.

Such flavorful breads, when baked in Europe in the past, contained stone-ground wheat that was not so finely pulverized that the grain lost its nutrient-packed germ and fiber-filled bran. These Old World-style breads remained the fare of country peasants, while sophisticated city folk ate loaves made with the newly invented refined flour.

A slice of good carbohydrates. Whole-grain and whole-wheat flours contain fiber, B vitamins, minerals, some antioxidants, and plant chemicals that may help protect against heart disease and certain cancers. A recent study underscored these health benefits when it found that people over 65 who ate the most fiber from cereals and dark breads were about 20 percent less likely to develop cardiovascular disease. Even when refined flours are enriched, only a portion of the nutrients that have been lost in processing are restored.

Carbohydrates made from finely pulverized grains have a high glycemic index (GI), are rapidly absorbed, and cause blood sugar levels to spike, while those made with whole or cracked grains have a lower GI rating, are digested and absorbed more slowly, and have less impact on blood sugar. Truth be told, I think products made from white flour are some of the unhealthiest creations of food technology.

Filling your bread basket. I'm eating less bread these days, but some of my favorites are rye, pumpernickel, and whole-wheat pita. Here's my advice for selecting the healthiest breads:

- Look for as few ingredients as possible on the label. Basically, it should contain flour (preferably organic), grain, water, yeast (or leavening), and salt. Bread should have at least 2 grams of fiber per slice.
- Don't judge a bread by its color. Some so-called wheat breads are mainly white flour mixed with a little whole-wheat flour plus molasses or caramel coloring. Make sure whole-wheat flour is the first ingredient on the label. For rye or pumpernickel, look for whole grain flour (often rye) as the first ingredient.
- Shop for bread at bakeries (especially a good German or Russian one) or health food stores. I like a European sourdough rye bread that's wheat-free, sold in the refrigerated or frozen-food sections of natural supermarkets, and made by French Meadow Bakery of Minneapolis. To find a local store, call (877) 669-3278.
- I don't think you need to eat bread at every meal. Bread with a high GI rating can be fattening for people who are carbohydrate-sensitive. ☺

Taking an Active Role in Your Cancer Care

Step into the chemotherapy room at the Los Angeles-based clinic of oncologist Lorne Feldman, MD, and see just how much cancer therapy has changed in the past four or five years. Music plays, as an acupuncturist and a massage therapist circulate among the dozen patients who are chatting while they get their infusions. A dietitian answers questions about nutrition. Nurses trained as cancer counselors do research for patients and provide medical referrals. Dr. Feldman, a graduate of our Program in Integrative Medicine's Associate Fellowship and a man who has been living with cancer himself for eight years, says, "My patients almost look forward to their treatments when they can get together with their friends. It's a *very* good support group."

It pleases me to see how many cancer centers around the country now routinely offer nutritional counseling, acupuncture, massage, mind-body techniques, and support groups to people getting chemotherapy and radiation. Hospital administrators are responding to patient demand, as the overwhelming majority of cancer patients are already using some form of complementary and alternative medicine (CAM). And oncologists are responding to increased evidence that these therapies improve the experience and possibly the prognosis for cancer patients. Even the generally conservative American Society of Clinical Oncology now offers information about CAM therapies on its patient website (www.plwc.org).

There's still a way to go before true integrative oncology is the standard of cancer care. None of the so-called integrative cancer centers I know of are willing to recommend the use of natural products like astragalus and other Chinese herbs to reduce toxicity of chemotherapy and radiation, or Asian mushrooms for anti-cancer effects. Instead, they stick to "safe" modalities like massage and counseling.

Still, the new whole-person, patient-centered approach gives cancer patients more say in their treatment decisions and more options for self-care. There are now many ways you can actively participate in your healing, helping yourself to feel better and function better—before, during, and after chemotherapy and radiation. I think even those who need only surgical treatment for cancer can benefit from the advice below.

Before Treatment Begins

If you have a few weeks before treatments begin, use that time to put your game plan in place. Build your strength through good nutrition, regular exercise, and plenty of rest. Educate yourself about the form and stage of cancer you have, and make sure you understand clearly the goals of the treatment you're about to undergo. Choose a state-of-the-art health-care team willing to partner with you in your care. Pull together your support crew—the people who will do research, take you to medical appointments, fill your refrigerator, drive your kids to soccer, provide progress reports to your friends, and keep you sane. Learn mind-body techniques such as self-hypnosis, guided imagery, or progressive muscle relaxation

from a professional or a good-quality audiotape. Assess your personal strengths—such as a positive outlook and determination—and consider how to use them best.

During Chemotherapy or Radiation

I recommend few herbs, vitamins, or supplements during the course of chemotherapy or radiation, except for those in the botanicals section below and in the box at right. The reason for this is a lack of solid research on their risks and benefits. Some herbs and supplements have the potential to interfere with chemotherapy and radiation. For instance, there's an ongoing controversy about whether taking antioxidant vitamins and minerals **interferes with conventional therapy** or enhances it. I prefer to err on the side of caution, and recommend against taking any supplements—even a multivitamin—that may have antioxidant activity during treatment.

The recommendations below are general, since specific prescriptions for diet, exercise, stress reduction, and psychological support may vary based on a patient's form and stage of cancer, other health problems, and personal preferences.

The six essential supports during cancer treatment are:

Healthy diet. Eat a whole-foods diet high in fruits and vegetables, including berries and dark leafy greens, which are rich in protective phytochemicals. (Don't skimp on fruits and veggies out of fears that they contain antioxidants; the concern is about antioxidant supplements, not food sources of them.) Go easy on animal protein, and get no more than 30 percent of total calories from fat, mostly from healthy monounsaturated fat (found in olive oil, nuts, and avocados) and omega-3 fatty acids (in salmon, walnuts, and ground flaxseed). Flaxseed may also be protective for those with hormonally driven cancers of the prostate, breast, ovaries, or uterus. If you eat meat, try to find hormone-free, organic varieties. Until the controversy about whether or not soy stimulates cancer cells is settled, eat no more than one serving a day of whole soy foods like tofu or soy milk, and avoid soy supplements (including soy protein powder). Right now, the data is mixed on whether soy may interact with tamoxifen (used to treat breast cancer or prevent its recurrence), so those on the drug may want to avoid soy altogether. Drink your six to eight glasses of water and other healthy beverages like green tea every day to help flush the toxic byproducts of treatment from your body.

Exercise. Moderate exercise has been shown to reduce fatigue, anxiety, and depression in cancer patients, and may boost immune function. Start with as little as two or three minutes of walking at a time, if necessary, gradually building to at least 30 minutes five days a week. Gentle, more meditative types of exercise such as tai chi or qigong may increase your sense of well-being.

Ask your doctor for an exercise prescription that fits your specific situation. Cautions may vary; for example, someone with low blood counts may be told to avoid swimming due to concerns about bacterial infections.

Stress reduction. Cancer treatment can be stressful, and chronic stress seems to weaken the immune system. Make sure to get enough sleep. Pick a mind-body technique that appeals to you and use it regularly to relieve anxiety, reduce pain and nausea, and help strengthen your immune system. Radiation oncologist Matt Mumber, MD, a graduate of the Associate Fellowship Program with a practice in Rome, Georgia, has found the Relaxing Breath described in my books and recordings to be very powerful for his patients.

Emotional and spiritual support. The American Society of Clinical Oncology now states that high-quality cancer care "requires" psychosocial support for the patient. There are few studies yet, but I believe that such intangibles as patients' active involvement in their care, their ability to cope with the changes in their lives caused by a cancer diagnosis and resulting treatment, and their sense of hope all affect quality of life and ability to heal. Surround yourself with positive people.

This is a time when many people turn toward the spiritual realm for strength and comfort. At our Program in Integrative Medicine (PIM) clinic, we do a spiritual assessment for

our patients and try to match them with people or groups that meet their interests—anything from doing soul retrieval work with a shaman to consulting a Presbyterian minister.

Botanicals. Medicinal mushrooms and their extracts can boost the immune system and may also have anti-tumor effects, and they are used in Japan and China to increase the effectiveness of conventional cancer treatment. To get a range of mushrooms, try a combination product such as MycoSoft Gold or Stamets 7 from Fungi Perfecti (www.fungi.com or 800-780-9126), or Host Defense from New Chapter (available at health food stores). Dr. Mumber has found that a green tea/maitake mushroom blend is especially helpful for patients with cancer-related fatigue. At the PIM clinic, we have also recommended two Chinese herbal formulas, Chemo-Support and Radio-Support, to reduce the toxicity of conventional treatments. The Crane Herb Company (www.craneherb.com) sells both of these formulas to health practitioners.

If there are botanicals or supplements that you would like to take during treatment, be sure to talk to your physicians. They may not be willing to recommend products to you (on account of liability issues), but may accept your taking them on your own initiative.

Energy medicine. PIM executive director Victoria Maizes, MD, always recommends acupuncture—during or after the course of treatment—to cancer patients at our clinic because she's found that it reduces pain and nausea, raises low energy levels, and increases the ability of patients to tolerate chemotherapy. In addition, I suggest that you consider energy therapies such as Therapeutic Touch, Reiki, and Jin Shin Jyutsu.

Relief for Common Side Effects

Nausea. Better prescription drugs are now available for nausea and vomiting before, during, or after chemotherapy sessions. I still sometimes recommend ginger root extract (in capsule form or brewed as a tea), candied ginger (take a little piece as needed), hypnosis, or even medicinal marijuana to selected patients. Use of acupuncture point P6 on the wrist is now widespread, either through acupuncture treatments offered by a practitioner, self-acupressure applied with a thumb, or devices such as the Sea-Band wristband (sold in drugstores). Dr. Matt Mumber has found the ReliefBand, a wristband electronic device, to be effective for nausea (to learn more, visit www.reliefband.com).

Fatigue. Check first for a medical cause, like anemia. Improve your sleep habits, and maintain regular exercise to overcome tiredness. Try a daily tonic like cordyceps or ginseng. Drink green tea. Consider acupuncture or energy medicine. Dr. Lorne Feldman urges his patients to deal with underlying stress or anger about cancer that may be draining their energy.

Weight loss. If you've lost your appetite, you may have to veer off the perfect diet and add enough foods that seem appealing to keep yourself at a healthy weight during treatment. Omega-3 fatty acids (found in salmon, walnuts, and ground flaxseed) may help prevent tumor-induced weight loss. The makers of the liquid supplement Ensure now have a version containing omega-3s, called ProSure, for just that purpose.

Mouth sores. People undergoing chemotherapy or radiation often suffer persistent sores in the mucous membranes of the mouth that can make eating painful. Lozenges of slippery elm or chewable tablets of DGL (deglycyrrhizinated licorice) may soothe the lining of the mouth. A mouthwash of L-glutamine powder and water or a homeopathic remedy called Traumeel may also be useful.

Burns. Applying aloe vera gel or vitamin E (open a gelcap and then squeeze out the liquid inside) can soothe reddened or burned skin after radiation treatment.

Once Treatment Is Over

After chemotherapy and radiation are finished, the real work of restoring your health and preventing recurrence can begin. Start taking a good-quality multivitamin and multimineral supplement again. You can add a daily tonic such as *Panax ginseng* or eleuthero (Siberian) ginseng. Women recovering from breast cancer may want to take Coenzyme Q10 after chemotherapy is done (180 mg a day in softgel form with meals), as preliminary research suggests this supplement may increase longevity and prolong remission in breast-cancer patients. Also, preliminary research suggests high doses of melatonin (20 mg a day at bedtime) may extend survival and improve quality of life in people with advanced solid tumors who haven't been helped by conventional treatment.

Consider traditional Chinese medicine to restore balance to your body. Maintain or gradually increase your exercise program. Your diet is a key preventive strategy to stop your cancer from coming back, so focus on fruits, vegetables, whole grains, and foods specifically associated with prevention of the type of cancer you had. Now may be a good time to find a counselor or a support group to help you deal with issues that have come up as a result of your cancer diagnosis. ☘

Rhodiola; Speeding Bone Healing; and More

What's your opinion of kefir? Will it work as well as probiotic supplements at providing "good" bacteria?

Kefir is a fermented milk product that has a similar texture and tart taste to liquid yogurt. Kefir can act as a probiotic because it contains live active bacteria and yeast cultures that are beneficial to the intestinal tract. For this reason, drinking kefir regularly is said to help relieve gastrointestinal problems, reduce flatulence, and boost immunity, but there's little good clinical evidence supporting these claims. Popular in Russia and Eastern Europe, the beverage is sold here in health food stores, either flavored with fruit or plain.

While I think kefir and yogurt with live active cultures are helpful and tasty ways to obtain more "good" bacteria and maintain a healthy balance of intestinal flora, I'd look in

health food stores for a probiotic supplement that contains *Lactobacillus GG* bacteria (such as Culturelle) if you have a specific need to restore the growth of protective bacteria in your digestive tract. Take probiotic supplements with a meal.

I have recently heard about the benefits of rhodiola. Is this herb worth taking as a daily supplement?

Word seems to be catching on in the United States about rhodiola, an herb that's long been popular in Russia, Scandinavia, and Asia as an energy booster, stimulant, immune system strengthener, and sexual enhancer. I think rhodiola is an interesting adaptogenic tonic, meaning that taking it on a daily basis may increase resistance to various biological, chemical, and physical stressors. The root of

HEALTH IN THE NEWS

This Just In . . .

New Blood Pressure Guidelines.

Millions of Americans who thought their blood pressure was fine actually have "prehypertension" and should make lifestyle changes to avoid developing full-blown high blood pressure, according to new federal guidelines. Normal blood pressure is now considered less than 120 over 80 (formerly considered "optimal"), the new prehypertension level is 120 to 139 over 80 to 89 (formerly normal or "high normal"), and hypertension remains 140 over 90 or more. The stricter standards are based on studies showing that heart disease risk begins to rise at lower blood pressure levels than once thought.

Those with prehypertension are encouraged to lower their blood pressure by losing excess weight, being more physically active, limiting sodium and alcohol intake, and following the DASH diet, which is rich in fruits, vegetables, and low-fat dairy products. For hypertensive people needing drug treatment, the new guidelines place a greater emphasis on using inexpensive diuretics, either alone or in combination with newer, more expensive drugs. (*Journal of the American Medical Association*, May 21, 2003)

Support for the Atkins Diet?

Two studies suggest that the low-carbohydrate, high-fat, and high-protein diet advocated by the late Robert Atkins, MD, may trim pounds faster than a low-fat diet, but over time there may be little difference. In a yearlong study of obese people, those on the Atkins diet lost an average of 15 pounds after six months, while those on a low-fat diet lost 7 pounds. But by the end of the year, the Atkins group had regained 5 pounds and the low-fat group had regained 2 pounds, leaving a statistically insignificant difference between the two groups. And in a six-month study of severely obese people, those on the Atkins diet lost an average of 13 pounds versus 4 pounds for the low-fat dieters.

In both studies, the Atkins group had greater increases in HDL ("good") cholesterol and/or greater decreases in triglycerides despite eating more fat. One possible explanation: The low-fat groups ate more carbs, and those with a high-glycemic-index rating (such as white bread) may lower production of HDL cholesterol and increase production of triglycerides in carbohydrate-sensitive people. (*New England Journal of Medicine*, May 22, 2003)

Comment: Despite these findings, the long-term safety of the Atkins diet is unknown. Eating excessive amounts of protein may impair long-term liver

and kidney function and raise osteoporosis risk. (A five-year study now starting will also look at these health risks.) I still believe the healthiest way to lose weight and keep it off is to eat a sensible diet including *both* good carbs (whole grains, beans, fruits, and vegetables) *and* good fats (in olive oil, fish, and nuts), and to be physically active.

Fishing for Change. Salmon lovers like myself received some great news in April, when Congress approved a measure drafted by Alaska's Senators Ted Stevens and Lisa Murkowski to allow wild seafood, including wild Alaskan salmon, to be certified and labeled as organic. Previously, the government had fought such a law, arguing that wild fish isn't truly organic, since we don't know what environments—or pollutants—it may encounter in the ocean. Ironically, farmed fish may be labeled organic if it's fed organic feed, though I haven't seen any on the market. All farmed salmon is artificially colored pink, and may contain residues of antibiotics and other drugs used to treat diseases that occur in the overcrowded cages in which it's raised.

Comment: I believe there's no reason why wild-caught salmon and other seafood *shouldn't* be labeled organic. This law will offer one more option to consumers who want to eat organic. 2

Rhodiola rosea is the source of the remedy, and it exhibits antioxidant properties. Much of the research done on rhodiola has been from other countries, where it has been found to increase endurance in athletes and improve work productivity and mental clarity in people under stress.

I've experimented with this herb, but haven't yet formed a definite conclusion about whether it made a noticeable difference in my energy levels. You may want to try it for two months and see how you feel, but if the real reason you lack energy is an underlying medical problem, like hypothyroidism or depression, for example, rhodiola may not be helpful. Look for a product that's standardized for rosavins and salidroside (thought to be the active ingredients) and follow package directions. The herb has few side effects, but may initially interfere with sleep or cause vivid dreams.

Is it safe to take birth control pills continuously to avoid having my period?

Long used by women with endometriosis or those who wish to "reschedule" their periods around vacations or weddings, menstrual suppression is now being recommended by some doctors as an easy way to avoid the hassle of a monthly period. If you take birth control pills, you can skip a period by taking two continuous packs of pills, without taking the placebo week. This practice seems safe occasionally, but I wouldn't recommend cutting your periods to just two or three times a year unless you have severe menstrual problems like endometriosis; we don't yet know the long-term effects of menstrual suppression.

I'm interested in taking saw palmetto for my enlarged prostate, but will it affect my PSA level?

The herb saw palmetto has been shown to be an effective treatment for an enlarged prostate gland (benign prostatic hyperplasia), with few side effects. As you know, prostate-specific antigen (PSA) tests can screen for prostate cancer, since high levels of PSA may indicate malignancy. While some physicians have expressed concern that saw palmetto could mask prostate cancer by lowering PSA levels, several large studies have found the herb doesn't affect PSA. Still, it's a good idea to tell your doctor if you're taking saw palmetto or any other supplements. When using saw palmetto, look for capsules or tablets standardized for 85 to 95 percent fatty acids and sterols, compounds believed to be the active ingredients, and take 160 mg twice a day.

Are there any supplements or therapies that help broken bones heal faster? I broke my wrist and had pins put in it.

Broken bones typically require four to six weeks to heal properly, but a few natural measures may help speed the process along, even if you're in a cast or have had surgical pins inserted. You might try taking a homeopathic remedy such as *Calcarea phosphorica* or *Symphytum*, both of which are said to relieve the pain and swelling associated with fractures and may encourage healing. These products are sold by some health food stores and online retailers; follow package directions. I'd also consider seeing a practitioner of Reiki or

SELF-CARE

Fun in the Sun

Summer is here, and staying hydrated and covered with sunscreen is only half the battle. Whether you've been bitten by a bug or bothered by blisters, natural measures can help. Here are my favorite remedies to make your summertime livin' a little easier.

Summer skin care. Stay out of harm's way by avoiding excessive sun exposure, especially direct sunlight between noon and 3 pm, applying sunscreen generously and often, and wearing a wide-brimmed hat and sunglasses. Also, many companies now sell clothing designed to block UV light. Still, most of us get burned occasionally, and my first choice for relief is aloe vera gel. If you have an aloe plant, cut off a lower leaf, split it open, and apply the gel directly to the sunburn. (You can also use bottled aloe gel or lotion.)

An herbal travel kit. When I'm traveling, I make sure to pack three indispensable herbs: echinacea, tea tree oil, and ginger. Echinacea can help keep your vacation free of coughs and colds that may be caused by stale airplane air. Take two capsules of the herb three or four times the day before and day of your flight. Tea tree oil is a powerful disinfectant that can be applied directly to skin infections, or diluted with water to rinse and clean minor wounds. And I've found that chewing on a piece or two of candied ginger one-half hour before travel can help prevent motion sickness.

When the bugs bite. To keep mosquitoes and other bugs away, I recommend using an insect repellent containing geraniol, a plant-derived product that's free of negative side effects, unlike its toxic counterpart DEET. Visit www.hensonsales.com for products with geraniol. If you get bitten, try rubbing Tiger Balm—a Chinese herbal salve that can ease the irritation—on the affected area; it's available at health food stores.

Basics for blisters. Small blisters will heal on their own, but you can pop larger ones if they're painful or located on a weight-bearing area like the bottom of the foot. Wash the area, then puncture the edge of the blister (keep the top intact) with a sterilized needle and gently squeeze out any fluid. After draining the blister, disinfect it with hydrogen peroxide or tea tree oil, and cover it with gauze or a bandage. ☺

Therapeutic Touch, since some people have found that these energy therapies can help broken bones heal faster.

If your fracture is very slow to heal—taking longer than three months—you might ask your orthopedist about physical field therapies. These involve battery-powered devices that can be worn over a cast or surgically implanted near the fracture and which emit low-level electrical fields to help stimulate your body's production of bone-healing compounds. And take steps to prevent osteoporosis (see the January 2003 issue), which will reduce your risk of another fracture. ☺

Easing Endometriosis

It's one of the most common women's health conditions, but also one of the most misunderstood. Endometriosis, in which the endometrial tissue that normally lines a woman's uterus also grows on pelvic or abdominal organs, affects up to 20 percent of American women of childbearing age. Yet, research shows many women live with this often-painful condition for a decade before being accurately diagnosed.

In women with endometriosis, the endometrial tissue that normally builds up in the uterus and is shed with a menstrual period appears outside the uterus, growing on the ovaries, bladder, intestines, and other organs, as well as in the pelvic cavity. These abnormal lesions of tissue bleed monthly, just like normal endometrial tissue, but the blood can't exit the body like menstrual flow. Instead, it often causes inflammation and scarring, which may result in excruciating cramps, chronic pelvic discomfort, pain during or after sex, heavy bleeding, or painful bowel movements or urination during menstruation. You can have severe endometriosis without pain, or incapacitating pain with just a few lesions.

Unfortunately, some physicians tend to downplay these symptoms, telling women that they're "just cramps." Plus, many women first experience endometriosis in their teens, when they're likely to think that such pain is normal. In one survey, half of women with endometriosis had to visit their doctors five or more times before being properly diagnosed. If you've got severe cramps or other symptoms and feel you aren't being taken seriously, ask your doctor if it's worth getting a laparoscopy, a minor surgical procedure that can confirm endometriosis and rule out health problems with similar symptoms, like irritable bowel syndrome and ovarian cysts.

The exact cause of endometriosis is still unknown, but one theory is that the condition stems from retrograde menstrual flow, in which blood from a woman's period backs up into her pelvis. However, this occurs in most menstruating women, so genes may somehow determine who gets endometriosis and who doesn't. Researchers once speculated that using tampons or having intercourse while menstruating might push menstrual fluid back into the pelvic cavity, but recent studies haven't shown such a link. Other research suggests that endometriosis may be triggered by high levels of estrogen or by exposure to high levels of environmental toxins.

Contrary to popular belief, having endometriosis doesn't mean you can't have children. It's true that severe endometriosis—which can scar reproductive organs—is one of the top three causes of female infertility. But about 90 percent of women with mild to moderate endometriosis are able to get pregnant within five years of trying to conceive.

Since we don't yet have a cure for endometriosis, conventional approaches aim to relieve pain. For mild endometriosis, a pain reliever such as ibuprofen—taken before cramps start—may be all you need. Other drug remedies work by temporarily decreasing or stopping the menstrual cycle: Birth control pills, often taken continuously for months at a time, work best for mild or moderate endometriosis. Other hormonal drugs, like Danazol and Lupron, are effective, but they can have a number of side effects, ranging from acne to hot flashes. In addition, there are various surgical options, the most extreme of which is a hysterectomy, which removes the reproductive organs but doesn't guarantee that endometriosis won't return in other areas.

Natural Measures Can Help

Fortunately, natural measures can help relieve pain and other endometriosis symptoms and may help prevent more lesions.

Diet. Eat a wholesome diet that's high in omega-3 fatty acids (in salmon and flax), which can ease cramps, and low in polyunsaturated and trans fats (in margarine and many processed foods), which promote inflammation. While an environmental link to endometriosis hasn't yet been confirmed, I still think it's a good idea to favor organic produce.

Mind-body approaches. Practicing a daily relaxation technique can help you cope with the pain associated with endometriosis. Options include breath work, meditation, yoga, and tai chi. Plus, some of my patients with the condition have had improvements in pain and fertility after regularly practicing guided imagery or hypnotherapy.

Supplements. The herb chaste tree (*Vitex*) has long been used as a general tonic for the female reproductive system, and it may help ease endometriosis by balancing out hormones. Follow package directions, and avoid chaste tree if you also take birth control pills or other hormonal drugs, as it may interfere with them. Some of my patients have found that a daily cup or two of raspberry leaf tea helps relieve cramps, as can calcium and magnesium (get at least 1,200 mg of calcium a day from food, supplements, or both, and half the amount of magnesium).

Chinese medicine. I've had many patients benefit from traditional Chinese medicine (TCM), which treats endometriosis with a combination of acupuncture, diet, and various herbs. For best results, see a TCM practitioner. ☯

Many of the suggestions above come from Ann Mattson, MD, a Boulder, Colorado-based ob/gyn and Program in Integrative Medicine graduate Fellow.

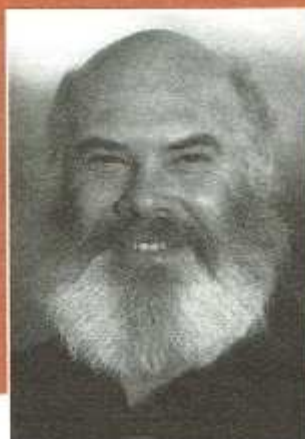
coming up

Caring for the caregiver • Congestive heart failure • Medicinal mushrooms • Good food/bad food • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing*; *Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:
www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

August 2003

Dear Reader,
Last month's mention of my writing vacation generated some inquiries about the book I'm working on, which will offer a unique perspective on aging. The chapters I'll be writing this summer will discuss the rise of anti-aging medicine. I consider such efforts to stop or reverse aging to be impossible. Rather than denying the aging process, I encourage people to accept it and learn how to age gracefully.

I plan to fill the book—to be published in winter of 2005—with practical advice to increase your chances of arriving at old age as healthy as possible. Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Coping with Congestive Heart Failure	2
Shades of Gray	3
Caring for the Caregiver	4
Ask Dr. Weil: Hip Replacement, Obsessive Thoughts, & More	6
Getting Under Your Skin	6
Health in the News	7
Mushrooms as Medicine	8

Good Food, or Bad Food?

A trip to the supermarket can pose some perplexing health questions: Should you eat fish to protect your heart, or does mercury contamination offset its benefits? Are eggs good or bad for you? Below, I'll offer guidance on several foods you may have wondered about.

Cheese. For years, I seldom ate cheese because I was concerned about its effect on my cholesterol levels and cardiovascular health. More recently, scientific studies have reassured me that a heart-healthy diet (such as the Mediterranean diet) can include daily consumption of moderate amounts of cheese. I use only high-quality natural cheeses, and I avoid very high fat varieties like Brie and triple cremes. I use freshly grated Parmesan as a seasoning on many dishes, and I like to snack on Gruyère.

Chocolate. If you consider chocolate a guilty pleasure, you'll be glad to know that high-quality dark chocolate is a healthy treat as long as you don't go overboard. Dark chocolate is richer in heart-protective flavonoid compounds than milk chocolate, and has more cocoa butter, which appears to have a beneficial effect on cholesterol levels. The first ingredient on the label should be chocolate (listed as chocolate liquor, cacao, or cocoa) rather than sugar. I like brands that contain at least 70 percent cocoa; look for them at Trader Joe's stores or specialty shops that sell chocolate made in Belgium, France, or Venezuela.

Eggs. While egg yolks are high in cholesterol, research shows that eating an egg a day has no significant impact on the risk for heart attack or stroke. Egg yolks contain a wide array of essential nutrients, including vitamins A, D, E, and K and iron, while the whites are a great source of high-quality protein. Several companies now sell eggs that contain beneficial

omega-3 fatty acids as a result of special mash fed to the hens. Whenever possible, choose eggs from free-ranging, organically raised hens.

Fish. People who eat fish regularly live longer and have less chronic disease than those who don't, but fish can also be a source of mercury and other environmental toxins. I recommend eating at least two servings per week of wild Alaskan salmon, mackerel, herring, or sardines. All are rich in omega-3s and are relatively toxin-free. Meanwhile, the FDA advises pregnant women to avoid shark, swordfish, king mackerel, and tilefish because of high mercury levels, and I advise others to steer clear of them as well. I also suggest limiting fresh or canned tuna due to concerns about mercury.

Nuts. While nuts are high in fat, it's most often the healthy, monounsaturated kind. Studies show that eating nuts in moderation—say, a handful a day—can lower heart disease risk. Nuts also contain vitamin E, minerals, fiber, and (in the case of walnuts) omega-3 fatty acids. Because nuts are high in calories, eat them *instead* of other high-calorie snacks. I use mostly raw, unsalted nuts, and I store them in the refrigerator to protect them from going rancid. (Peanuts are legumes, not nuts, and have a less desirable fatty-acid profile.)

Sprouts. Despite their reputation for being healthy, alfalfa sprouts and other raw legume sprouts (from clover, mung beans, lentils, and chickpeas) contain natural toxins that may harm the immune system. I'd avoid eating them. Because these substances are broken down by cooking, I have no problem with cooked legume sprouts (although alfalfa sprouts and clover sprouts turn to mush when cooked). Raw sprouts of non-leguminous plants—including broccoli, radish, sunflower, and buckwheat—are free of natural toxins. ☺

Coping with Congestive Heart Failure

A diagnosis of heart failure should get your attention, but not scare you to death. Heart failure doesn't mean your heart is going to stop right this minute, rather that it's not doing its job as well as it should. Although this is a serious health problem, I tell my patients the key to living well despite heart failure is taking an active role in their own care.

Heart failure (sometimes called congestive heart failure) is the inability of the heart to meet the circulatory needs of the body. This happens when heart muscle can no longer properly contract (systolic heart failure) or relax (diastolic heart failure). The lack of pumping power may be due to heart muscle damage from heart attack or infection, stiffening or thickening of heart muscle from hypertension or diabetes, or malfunctioning heart valves. Valves can be repaired or replaced surgically, but there is no cure for the other types of heart failure. My goal in those cases is to recommend medications and lifestyle changes that treat the underlying causes of heart failure and slow progression of the disease.

When the heart is unable to pump as well as it should, it compensates by enlarging, thickening, or beating more frequently. These compensations further reduce the heart's efficiency; eventually, back-pressure in the circulatory system affects other organs, including the kidneys. Fluid may collect in the legs or ankles, causing swelling, or in the lungs, causing shortness of breath. These symptoms and the fatigue that is common in people with heart failure may limit their daily activities. Yet, I believe that even people with moderate to severe heart failure can live active lives once they decide to work with their hearts.

It's not enough to just take the medications your doctor prescribes (though it's a good start). You need to make a commitment to steady self-care as well. Katharine Burleson, MD, a cardiologist and senior Fellow at the University of Arizona's Program in Integrative Medicine, encourages patients at our clinic to move from anger at their "bad hearts" to gratitude for all the work those organs have done and are still doing. She asks them to commit to living in a way that reduces the workload on their strained hearts. In this partnership, she says, "You need to keep fluids in balance, hormones in balance, and your life in balance. Even when you achieve stability with several medications, you can destabilize your

condition by going away to a family reunion for a weekend and eating the wrong food. It's a constant balancing act."

Here are my—and Dr. Burleson's—tips for managing heart failure integratively:

1 Take your prescribed medications. Drugs such as beta blockers, ACE inhibitors, digitalis, and diuretics are often prescribed in combination to heart-failure patients. These drugs can stabilize and strengthen heartbeat, decrease pressure inside the blood vessels, and regulate fluid balance.

2 Keep other health conditions in check. Sadly, many cases of heart failure could have been prevented if people had made the commitment to prevent or control high blood pressure, atherosclerosis, and diabetes. If one of these conditions is affecting your heart, you need to reverse or control the condition through a healthy diet, regular exercise, and sticking to the drug regimen prescribed by your doctor.

3 Exercise. Even though a decreased exercise capacity is one of the symptoms of heart failure, exercise is actually one of the most recommended therapies for it. Exercise can build muscle strength and stamina, improve breathing, and relieve depression and anxiety (thereby reducing the output of stress hormones that can damage the heart). Regular physical activity can also help you reach a healthy weight, which will reduce the strain on your heart.

Ask your doctor for an exercise prescription customized to your age, fitness level, and stage of heart failure. You'll likely be started with either walking or riding a stationary bicycle, two activities that can be done at any level of effort and can strengthen leg muscles, reducing the heart's workload. Eastern forms of movement such as tai chi and qigong also build leg muscles while improving circulation, and they provide a sense of relaxation.

Always warm up first with 10 minutes of gentle stretches or slow walking to prepare the cardiovascular system for the demands of exercise. If you have been very sedentary, you may only be able to exercise for 2 or 3 minutes at a time at first. Gradually work your way up to 10 or 15 minutes of alternately exercising for 2 to 4 minutes and then resting for 1 minute. Next, work up to 5 minutes of exercise followed by 2 minutes of rest for a total of 20 to 40 minutes. Your ultimate goal is to do 20 to 40 minutes of continuous physical

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Carl Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERNS: Jennifer Cotte, Maggie Cramer
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamway
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. • Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. • This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING:
42 Pleasant St., Watertown MA 02472.
Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 523-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

activity three to five times a week. One caution: Don't take ACE-inhibiting medications (which can widen the blood vessels) at the same time of day as you exercise, since doing so can drop blood pressure so much as to make you dizzy.

4 Get off the emotional roller coaster. High levels of the stress hormones adrenaline and cortisol make the heart work harder, so I encourage my patients to learn how to deal with emotions like anxiety and depression in a positive way. Counseling, meditation, exercise, and positive social interactions can all be helpful. Get a pet, plant a garden, volunteer in your community, listen to music, or spend time with people you enjoy to keep stress hormones at bay.

5 Eat healthy. Try to eat a moderately low-fat, heart-healthy Mediterranean-style diet, rich in fruits, vegetables, whole grains, and omega-3 fatty acids. (For more on the Mediterranean diet, see the February 2001 issue.) People with heart failure tend to retain fluids, and must be vigilant for warning signs of cardiovascular congestion like swelling in the legs or shortness of breath. The sodium in salt promotes fluid retention, so avoid processed foods that are high in sodium and other sources of unnecessary salt, and make an effort to keep sodium intake below 3 grams a day.

6 Breathe deeply. A session or two of breath work daily can improve oxygenation of your blood, take some strain off your heart, and relieve anxiety. Try the Relaxing (4-7-8) Breath described in my books and recordings.

7 Clean up your act. People with heart failure should not smoke tobacco and should stop or severely limit their alcohol intake because of the damage these substances do to the cardiovascular system. Also, a yearly flu shot is recommended because of a greater risk of complications from flu.

8 Consider supplements. Dr. Bursleson suggests supplementing with Coenzyme Q10, which may support energy production in heart-muscle cells and reduce symptoms in people with less severe forms of heart failure. CoQ10 might be especially useful for someone on a cholesterol-lowering statin drug, as this class of drug appears to interfere with the body's natural production of CoQ10. A reasonable dose would be 100 to 200 mg a day, preferably in the form of easily absorbed softgels. Be aware that CoQ10 may interfere with the blood-thinner Coumadin (warfarin).

I think two other supplements may benefit heart-failure patients: the herb hawthorn, which may increase heart-muscle strength and also acts as a diuretic, and L-carnitine, an amino acid that improves the metabolism of heart-muscle cells. Suggested daily doses are 900 mg of hawthorn extract and 2 grams of L-carnitine. Know that hawthorn may interact with digitalis and other heart drugs.

I suggest trying one of these three supplements at a time to see if they help (first CoQ10, then hawthorn, then L-carnitine), but eventually it's fine to use all three together. Be sure to tell your doctor if you're using any of these supplements, as your drug dosages may need to be adjusted.

9 Avoid NSAIDs. Studies have found that nonsteroidal anti-inflammatory drugs such as aspirin, ibuprofen (Motrin), and naproxen sodium (Aleve) may increase fluid retention and worsen heart failure. COX-2 inhibitors (Celebrex, Vioxx) theoretically have the same effect. I think it's still safe for people with heart failure to take a daily low-dose aspirin for cardiovascular health. ☺

HEALTHY LIVING

Shades of Gray

When I first noticed gray hairs in my beard in my 40s, I felt it gave me a distinguished look. Going gray can make you feel sophisticated, sexy, or anxious about getting older. Like it or not, gray hair is generally a sign that you're aging normally. While much about graying remains a mystery, I'll answer some inquiries about this process.

What influences when you turn gray? The timing is due mostly to genetics, but gender, age, and, rarely, certain health conditions are also factors. It's not known if stress plays any role in the graying process.

What causes hair to go gray? As you age, the hair follicles make less melanin, a color-producing pigment. You don't really "turn" gray; instead, an individual hair that grows in with less melanin looks gray, while one with no pigment is white. The contrast between the dark and the white strands makes a head of hair appear gray. It's unclear why melanin production shuts down, but hair cells may be genetically pre-programmed to make only a certain amount of pigment. Interestingly, cancer patients who receive chemotherapy and lose gray hairs may find their hair grows back in its original color.

When will graying occur? It varies by individual, but on average gray hairs first start appearing in men about age 30 and in women around 35. Scalp and facial hair may gray first, while body hair grays later or not at all. Graying occurs gradually over many decades. When you hear about people "graying overnight," what really happens is that there's an increase in hair loss, often due to illness, so the gray strands become more noticeable when more dark hair falls out.

Can I prevent graying? You can't prevent, stop, or reverse graying. Claims that pantothenic acid (vitamin B-5) or *ho shou wu* (a Chinese herbal remedy) can forestall graying and restore normal hair color have not been supported by scientific evidence. Also, graying is not due to a nutritional deficiency. If you want to hide your gray, hair dyes made from henna or other natural colorings may be safer than chemical dyes.

Should I be concerned about premature graying? Going gray early—before age 20 in Caucasians or 30 in blacks and Asians—is rarely a sign of disease or early aging. Premature graying may run in families and can also occur with thyroid disorders, pernicious anemia, and progeria (premature aging), but other symptoms are often present. One study found that smokers are more likely to go gray at a young age, but it's not clear if there's a cause-and-effect relationship. ☺

For head-to-toe advice for body and mind, buy the **Self Healing Guide to Women's Health** (see enclosed brochure).

Caring for the Caregiver: How to Prevent Burnout

On a recent trip to Okinawa, Japan, I visited a centenarian man who lived alone. His neighbor, an 85-year-old woman, looked after him. She glowed, and my mother, who joined me on the trip, commented that taking care of him was keeping this woman going. Here in the United States, about one in four adults (more than 50 million people) provide care for an elderly, disabled, or chronically ill family member or friend, and this number will increase as the population ages. Caregiving can encompass anything from running occasional errands for an aging parent, to providing 24/7 care for a bedridden spouse, to helping coordinate care from afar (see the box on page 5).

The rewards of caregiving include having a chance to “pay back” what a parent or spouse has given you through the years, developing a closer relationship with your loved one, discovering inner strengths you didn’t know you had, and growing in compassion. Indeed, many do it as a labor of love.

While caregiving undoubtedly has its rewards, it can also be extremely stressful. You may be exhausted from having your sleep interrupted. You may feel guilty because you think you’re not doing enough, angry that other family members don’t seem to pitch in, or anguished to see a loved one suffer. Those in the “sandwich generation” are juggling the demands of caring for their aging parents, raising their own children, and often holding down a job. And caregiving can be physically demanding—if you have to lift or carry a loved one, for example.

Given all the stresses, it’s not surprising that some studies have found caregivers have higher rates of depression and anxiety. Also, one study of elderly people found that those experiencing emotional strain from taking care of a spouse had a 63 percent higher risk of *dying* within four years than noncaregivers (*Journal of the American Medical Association*, December 15, 1999).

Herbal Help for Bedsores

Bedsores—also called pressure sores or ulcers—are a common problem of bedridden people. These painful wounds can occur on any part of the body that’s under constant pressure, so shifting positions frequently is an important preventive measure. If your loved one develops a bedsore, I’ve found the herb comfrey, made into a paste for topical application, to be an effective treatment. Comfrey root contains allantoin, a compound that promotes the growth of new skin cells. You can buy dried comfrey root in bulk from online retailers and some health food stores. Grind it to a powder in a blender, and mix the amount you need with water—or even better, with aloe vera gel—to make a paste. Gently pack it on the wound and cover with a bandage. Once a day, wash out the wound with hydrogen peroxide to prevent infection, and put on fresh comfrey paste and a new bandage.

Helping Yourself So You Can Help Others

With their time and energy absorbed by looking after others, too many caregivers fail to take care of themselves. But self-care isn’t a luxury, it’s a necessity. You can’t provide quality care if you’re burned out. In fact, more people enter nursing homes because of caregiver burnout than because of a significant deterioration in their own health.

I believe it’s important that caregivers learn to set limits so they don’t deplete themselves. Here are more tips for caregivers to better care for themselves:

Educate yourself. The more you know about your loved one’s health condition, the better you will be able to assist with it. Talk with the physician in charge of the case and with other health-care providers, and stay informed about the treatment regimen, including drug interactions and possible side effects. Other resources include health organizations, your local library or bookstore, and the Internet. A website called MEDLINEplus (<http://medlineplus.gov>) is a useful starting point for learning about various conditions, prescription and over-the-counter drugs, and helpful organizations.

Cover your bases. Eating a healthy diet, being physically active, and getting enough sleep are all important for preserving your stamina and health. Also, consider taking a good multivitamin every day for insurance. Save time on cooking by preparing extra food that can be frozen and served later. Perhaps your loved one can do stretching exercises with you or even join you for a daily walk. If you have trouble getting out of the house to exercise, try fitness videos or consider home exercise equipment. If possible, rest when your loved one is sleeping, or try napping to catch up on sleep. Plus, see your doctor and dentist for regular checkups, and don’t neglect any health problems of your own.

Practice relaxation. You might wonder how you’ll find time to relax, but daily practice of breath work, meditation, or guided imagery takes little time and can help prevent burnout and even boost immunity. (For an article with an imagery exercise for caregivers, visit www.healthy.net/script/Article.asp?id=391.) You can also calm your body and mind by listening to soothing music, working in your garden, or watching funny movies. Plus, take pleasure in daily rituals you can do with your loved one, like reading together, having afternoon tea, or singing before bedtime.

Stay connected. Many caregivers feel isolated, which can take a toll on both emotional and physical health. Get out for lunch or dinner with a friend, or ask a friend to keep you company while you provide care. You can also stay in touch by phone or e-mail. If you care for an aging parent, make an effort to set aside “quality time” for your spouse and children every day, even if it’s just for a few minutes. And if you are so inclined, being part of a religious congregation can offer emotional and spiritual support.

Ask for and accept help. Make a list of tasks you’d like assistance with and ask family and friends if they can pitch in.

Long-Distance Caregiving

About 7 million Americans provide or manage care for someone age 55 or older who lives at least an hour away. Long-distance caregivers may feel guilty and anxious because they often can't be there to see how the person is doing, and may also feel overwhelmed by the challenges of arranging services from afar. One suggestion is to consider hiring a geriatric care manager (see below) to oversee all aspects of care.

Here are more tips from Nora Jean Levin, author of *How to Care for Your Parents* (Norton, 1997), and staff member of Caring from a Distance, a nonprofit group based in Brookline, Massachusetts.

The list might include running errands, cooking some meals, helping with cleaning, doing yard work, or watching your loved one so that you can have some time to yourself. Also, don't hesitate to accept help whenever it's offered, and be specific about how the person can lend a hand. A network of helpers who will each do a small task even once a month can make an enormous difference.

Learn about community resources. Your local Area Agency on Aging (AAA) can provide referrals to numerous services, such as meal delivery programs, transportation services, home health care agencies, homemaker services, senior centers, adult day care, and respite services. The agency can also help you find financial counseling, legal assistance, support groups, and hospice programs. AAAs may be listed in the city or county government sections of the phone book under "Elder Affairs." Or contact the Eldercare Locator at (800) 677-1116 or www.eldercare.gov to find your local AAA.

Consider hiring a geriatric care manager. These professionals (typically social workers or nurses) can evaluate your loved one's needs, locate and coordinate services, and monitor care. To find care managers near you, visit the website of the National Association of Professional Geriatric Care Managers (www.caremanager.org).

Take advantage of benefits programs. Financial worries can be a major cause of stress for caregivers, yet many older people fail to take advantage of the federal and state benefits they're eligible for, like nutrition services, home energy discounts, and property tax relief. The National Council on the Aging sponsors a free online service (www.benefitscheckup.org) that can quickly assess your loved one's eligibility for various benefits programs.

Maintain a network. Keep an up-to-date list of those who interact with your loved one (neighbors, friends, relatives, health-care providers) and stay in touch. They can help you determine if a problem is brewing.

Keep track. Have a list of the medications the person you're caring for is taking, and know where to find key financial and legal documents (will, advance directives). This information can be useful in the event of a crisis.

Stay informed. Whenever you visit your loved one, also try to visit with his or her physician or other health-care providers so that you can stay better informed.

Plan ahead. Have backup plans—at work and home—in case you have to drop everything and travel to see your loved one on short notice.

Express your feelings. Given the many demands that caregivers face, it's not uncommon for them to feel guilty, angry, or resentful. These emotions are normal, and they don't make you a bad caregiver. You may feel better if you share these thoughts with a friend or family member; also, consider joining a caregiver support group. Two organizations with support groups nationwide are Children of Aging Parents (www.caps4caregivers.org; 800-227-7294) and the Well Spouse Foundation (www.wellspouse.org; 800-838-0879). To find out about online support groups, visit www.ec-online.net or www.care-givers.com.

Watch for signs of depression. Caregivers who feel overwhelmed are more prone to depression. Be aware that feeling sad isn't the only warning sign: Some other symptoms of depression can include a change in appetite or weight, insomnia or excessive sleeping, feeling tired all the time, loss of interest in activities you used to enjoy, and being easily irritated or angered. If you suspect you have depression, seek out a mental health professional.

Take time off. Bringing your loved one to adult day care or obtaining respite care can give you a break from your caregiving responsibilities and can help protect against burnout. Adult day care centers may offer

social activities, help with personal care (like grooming and hygiene), and medical care. Some centers specialize in caring for Alzheimer's patients. Respite care can range from a few hours of in-home care to a short stay in a residential care facility or nursing home. For referrals, contact your local Area Agency on Aging.

Explore assistive devices. There are many gadgets that can help people with physical limitations manage everyday tasks on their own and be more independent. These range from easy-to-grip silverware and wall-mounted jar openers to elevated toilet seats and portable seat lifts. Doctors may know where to find such products, or you can look in the Yellow Pages under "Medical Equipment and Supplies." Also, check out www.abledata.com for information on a wide array of assistive devices.

Acknowledge your efforts. It can be easy for caregivers to get down on themselves for not being able to "fix" what's happening to people they care about. Instead, I encourage you to take pride in the hard work you're doing and in the service you're providing. ☺

To learn more, see *And Thou Shalt Honor*, edited by Beth Witrogen McLeod (Rodale, 2002). This companion volume to a PBS series on caregiving is full of practical advice, and lists many organizations and websites. Also, visit www.thoushalthonor.org for numerous links and a searchable database of community resources.

Some tips in this article come from Linda Phillips, PhD, RN, professor of nursing at the University of Arizona, and Russell Greenfield, MD, medical director of Carolinas Integrative Health in Charlotte, North Carolina.

ASK DR. WEIL

Hip Replacement; Obsessive Thoughts; and More

I'm having a hip replacement. How can I speed healing?

In this common operation, surgeons remove diseased portions of the hip joint and replace them with new, artificial parts, typically to reduce pain and improve mobility in people with osteoarthritis or hip injuries. This is major surgery, and it may take up to six months for you to fully recover, but there are some things you can do to speed your healing. First, I'd recommend listening to a guided imagery tape such as *Successful Surgery* (www.healthjourneys.com or 800-800-8661), both before and after surgery. Studies have shown that people who listen to such tapes heal faster, use less pain medication, and spend fewer days in the hospital. I suggest taking 1,000 mg of vitamin C per day for the first week after surgery to promote wound healing (ordinarily,

I suggest taking 200 mg of vitamin C per day). And it's important that you stay active after a hip replacement. Following surgery, your doctor should arrange for you to meet with a physical therapist, who will teach you exercises that you can do in bed and help you learn how to use crutches or a cane as you continue to heal. You should be able to resume regular physical activity within two months of surgery.

Does breastfeeding help prevent breast cancer? It's not mentioned in your article on breast cancer (February 2003).

Although research is mixed, most studies suggest that breastfeeding—like childbirth itself—offers some protection against breast cancer. One recent review of nearly 50 studies in 30 countries found that women who nurse have a 4.3

INTEGRATIVE MEDICINE

Getting Under Your Skin

When your skin has a problem, it shows. A rash, bumps, or growths can signal irritation, infection, or, occasionally, skin cancer. I asked Catherine Hoffman, MD, a dermatologist in private practice in Fresno, California, about how to treat some common skin concerns. In many cases, conventional treatments are your best bet, but I think natural remedies and mind-body therapies like self-hypnosis or breath work are also worth a try for many skin conditions. For any persistent problem, see your dermatologist for an accurate diagnosis.

Actinic keratosis. It begins as scaly, patchy areas on the face, scalp, chest, or other sun-exposed areas, and later has a wart-like surface. Caused by the sun, these growths are benign, but if untreated, a small percentage may develop into skin cancer (squamous cell carcinoma). The growths can be frozen off with liquid nitrogen, or treated with topical prescription drugs such as Efudex cream, Aldara cream, or Solaraze gel. Chemical peels and laser resurfacing may also be effective treatments. Using prescription Retin-A creams may help prevent recurrences, as can limiting sun exposure.

Boils and carbuncles. These painful, pus-filled bumps form under the skin when either an individual hair follicle (a boil or furuncle) or group of follicles (carbuncle) becomes infected with *Staphylococcus* bacteria. Boils typically occur in places you're likely to sweat, like the armpits, face, neck, backside, and groin; carbuncles are slower growing and more common in older men and diabetics. Hot compresses can help bring a boil to a head, but never squeeze or lance one at home—that can spread the infection. Your doctor may need to drain the pus and prescribe antibiotics.

Granuloma annulare. These flesh-colored bumps typically form a smooth ring with raised edges. Often found on the feet, legs, or hands, this skin rash occurs in children and adults. Its cause isn't known, and although it usually heals by itself, it can be treated with corticosteroids. Dr. Hoffman has prescribed Elidel cream, a nonsteroidal drug. If the condition is widespread, ultraviolet light therapy may help.

Keloids. These raised skin bulges look shiny and scar-like, and may be pink, purple, or brown in color. Often itchy or tender, keloids are a cosmetic

concern, and usually found in areas where you've had blisters, acne, or injuries. You'll see them on the shoulders, upper back, and chest, and they're more common in black people. Even if these benign bulges are removed, most treatments are unsatisfactory, and they generally recur. I might try rubbing DMSO (dimethyl sulfoxide) mixed with aloe vera gel on the keloid to see if the appearance improves. DMSO, a liquid solvent derived from wood pulp, may reduce the formation of fibrous tissue that makes up keloids; it's available from online retailers. Dr. Hoffman says she prescribes the drug Aldara—which stimulates the immune system to prevent keloid formation—to those who are keloid-prone.

Seborrheic dermatitis. This rash often occurs in areas with more sebaceous (oil-producing) glands, like the scalp, face, chest, and behind the ears. In newborns, it may appear on the scalp as a yellow and crusty inflammation (called cradle cap). In older children and adults, it's a thick, scaly, itchy red rash with large flakes. Seborrheic dermatitis may be caused by a fungus, seems to run in families, and worsens in cold weather. For some patients, relaxation techniques may help the condition, as can Elidel cream applied to the skin and medicated antifungal shampoos used on the scalp. ☺

percent lower risk of breast cancer for every year they breastfeed, in addition to the 7 percent reduction in risk they experience each time they give birth (*The Lancet*, July 20, 2002). Researchers suspect that breastfeeding may offer protection against the disease by decreasing a woman's lifetime exposure to estrogen, which can cause breast cells to proliferate.

Breastfeeding has many advantages for babies as well. Studies show that infants who are nursed appear to have stronger immune systems and higher IQs, and are less likely than formula-fed babies to be overweight as children. I agree with the American Academy of Pediatrics, which recommends that babies be breastfed for at least one year. That said, not all women are able to breastfeed: Some may have certain infectious diseases or take prescription medications that are secreted through breast milk, and some may not produce enough milk. My bottom line? A reduced risk of breast cancer is just one of the many benefits of breastfeeding, but women shouldn't feel guilty if they are unable to nurse. You can also lower your risk of breast cancer by limiting alcohol consumption, eating a healthy diet, exercising regularly, and avoiding long-term use of hormone replacement therapy.

Can vitamins cause weight gain?

I've seen no evidence that vitamins can pack on pounds. This belief may have stemmed from the fact that megadoses of B vitamins may increase appetite. The amount of B vitamins necessary to produce such an outcome is still unclear, but I'd assume it's much higher than what you'd find in a B-complex supplement or multivitamin. The only way for you to gain weight is to take in more calories a day than you burn off.

What's your advice for obsessive-compulsive disorder?

In this anxiety disorder, a person has recurrent, unwanted thoughts (obsessions) usually accompanied by repetitive rituals (compulsions). For instance, people with an obsession about germs and contamination may wash their hands constantly, while others may repeatedly check that the stove is turned off because of an obsessive fear of burning the house down. Obsessive-compulsive disorder (OCD) typically begins in adolescence or early adulthood, and may be caused by a chemical imbalance in the brain, such as an insufficient level of the neurotransmitter serotonin.

OCD usually responds to cognitive-behavioral therapy, antidepressant drugs, or both. In cognitive-behavioral treatment for OCD, you're exposed to a feared object or idea, but prevented from carrying out the usual compulsion. For instance, the therapist may ask you to touch something you consider contaminated, but urge you to avoid washing for several hours. As treatment progresses, most patients experience a gradual decrease in the frequency and intensity of obsessive thoughts and compulsive behavior. Antidepressant drugs appear to help by increasing levels of serotonin. Because stress can worsen OCD, I also suggest practicing a relaxation technique (such as breath work, meditation, or yoga) each day, getting regular exercise, and avoiding caffeine.

Also, small studies suggest the B vitamin inositol at high doses as well as the herb St. John's wort hold promise for treating OCD. If you wish to experiment with one of these,

Skip the Antioxidants?

Are antioxidant supplements worthless for preventing heart disease? That's the claim of a recent analysis by Cleveland Clinic researchers, who looked at 15 large studies of vitamin E and beta-carotene and their effect on heart disease. The controversial report found that people who took vitamin E supplements did not have a reduced risk of having a stroke or dying of heart disease, while users of beta-carotene (which forms vitamin A in the body) actually had a slightly *increased* risk of death from heart disease and other causes. The researchers say doctors should no longer recommend these supplements to patients with heart disease. (*The Lancet*, June 14, 2003)

Comment: I think the researchers' conclusions regarding vitamin E are misleading, since this analysis largely looked at the effect of vitamin E supplements on people who *already had* heart disease. Other research suggests vitamin E may only be effective in preventing heart disease *before* it starts, and I continue to recommend natural vitamin E for this purpose. (Many studies have used the synthetic form, which is different.) As for beta-carotene, the studies included in this analysis mostly involve smokers, and the idea that smokers should avoid beta-carotene isn't new. I don't recommend isolated beta-carotene supplements, and instead prefer that people get carotenes from foods like melons, squash, tomatoes, and dark leafy greens. You can also take a mixed carotene supplement for insurance. ☺

do so under the supervision of your doctor. The daily doses used in the trials were up to 18 grams of inositol in powdered form and 900 mg of St. John's wort standardized for hypericin. Interestingly, researchers here at the University of Arizona are studying whether taking the hallucinogenic drug psilocybin (derived from psychoactive mushrooms) under controlled conditions may help OCD. For more on OCD, contact the Obsessive-Compulsive Foundation at www.ocfoundation.org or (203) 315-2190.

Is blackstrap molasses a good alternative to sugar?

Blackstrap molasses is becoming popular with consumers, who mistakenly believe it has an elevated mineral content that makes it a health food. In truth, blackstrap has only slightly more minerals than regular molasses, and about the same number of calories per tablespoon as sugar. It is largely used in cattle feed. If you like the strong taste of blackstrap molasses, you might add it to baked beans and dishes made with pumpkin, as well as gingerbread and cakes. If you want to use molasses as a sugar substitute on hot cereals, oats, or grits, for example, I would suggest using a milder variety. Because of its sticky consistency, molasses—like honey—may be more damaging to teeth than other sweeteners. ☹

Mushrooms as Medicine

As a longtime mushroom enthusiast, I'm fascinated by the worldwide use of mushrooms as foods, medicines, and even mind-altering substances. (And I'm honored that for my work on mushrooms, there's one named after me, called *Psilocybe weilli*.) Here I'll discuss medicinal mushrooms and their uses, from complementary cancer care and enhancing immunity to treating arthritis and high cholesterol.

For centuries, the Chinese and Japanese have used mushrooms from the diet or in herbal formulas to prevent and treat disease. Researchers now believe the medicinal compounds in many mushrooms are complex sugars called polysaccharides, especially those known as beta-glucans. (Isolated beta-glucan supplements may not have the same benefits as extracts of whole mushrooms.) Polysaccharides appear to increase the number and activity of natural killer cells, the main destroyers of malignant cells, and also increase resistance to bacteria and viruses. Unfortunately, these beneficial compounds aren't found in the button mushroom commonly eaten in the West.

Most studies on mushrooms have been done in Asia, but now Western researchers are giving these fungi more scrutiny. Last year, scientists at Cancer Research UK conducted a comprehensive review of published studies and noted "the humble mushroom could be a source of novel anti-cancer agents." And US researchers are conducting lab tests of various mushrooms against the SARS, West Nile, and smallpox viruses.

Eight Medicinal Mushrooms

Below are eight of the best-studied mushrooms. Some—like enoki, shiitake, maitake, and lion's mane—make delicious and healthy additions to the diet. For cooking tips, see my book *The Healthy Kitchen*, co-authored by Rosie Daley (Knopf, 2002). All eight are also sold as liquid extracts or in capsule form; follow package directions. A good source for these supplements is Fungi Perfecti (www.fungi.com; 800-780-9126). It may take up to two months of regular use to notice benefits.

Cordyceps (*Cordyceps sinensis*). Also called "caterpillar fungus," this mushroom grows on the bodies of moth larvae (it's now cultivated on grain). In China, it's used as a tonic to increase energy and rebuild stamina, and I often recommend it to people who are debilitated by chronic illness. Cordyceps also has a reputation for improving athletic performance, and research suggests it may improve heart and lung function.

Enoki (*Flammulina velutipes*). A Japanese study found that the cancer death rates of enoki farmers (who eat these mushrooms frequently) were unusually low. A compound in enoki called flammulin shows significant anti-tumor activity.

Lion's mane (*Hericium erinaceus*). Used in traditional Chinese medicine to treat gastrointestinal problems, lion's mane also contains compounds called erinacines that stimulate the growth of nerve cells. That's why I suggest trying it for amyotrophic lateral sclerosis (Lou Gehrig's disease), multiple sclerosis, and other nervous system disorders.

Maitake (*Grifola frondosa*). Research in Japan indicates that maitake has significant anti-cancer, antiviral, and immune-enhancing properties. It may also reduce blood pressure and blood sugar. I think maitake can be useful as a general tonic, taken on a daily basis to promote overall vitality.

Reishi (*Ganoderma lucidum*). Valued by the Chinese and Japanese for extending longevity, reishi is another mushroom I've recommended as a general tonic. It can improve immune function and inhibit the growth of some malignant tumors. It also has anti-inflammatory effects, and I suggest that people with rheumatoid arthritis or osteoarthritis give it a try.

Royal sun agaricus (*Agaricus brasiliensis*). Formerly known as *Agaricus blazei*, this immune-enhancing mushroom appears to have strong anti-tumor properties, and it's widely used by cancer patients in Japan and Brazil.

Shiitake (*Lentinula edodes*). This mushroom, now sold at many supermarkets, not only boosts immunity and has antiviral and anti-tumor effects; it also contains a compound called eritadenine that's been shown to lower cholesterol.

Zhu ling (*Polyporus umbellatus*). Zhu ling has shown promise in the treatment of lung cancer, stimulating an immune response against lung tumors and reducing the side effects of chemotherapy and radiation.

Research suggests that combining different mushrooms may be more effective at enhancing immunity than using a single species. I now take a combination product, Stamets 7 from Fungi Perfecti, as a daily tonic. I recommend other mushroom formulas—MycoSoft Gold (also from Fungi Perfecti) or New Chapter's Host Defense (sold in health food stores)—to people with cancer or at high risk for cancer, as well as those with HIV/AIDS or depressed immunity.

Cautions: When possible, choose organic mushrooms and extracts; these are free of pesticides or heavy metals (which mushrooms concentrate from the soil). Extracts of immune-enhancing mushrooms might interfere with immune-suppressing drugs used to treat autoimmune conditions or prevent organ-transplant rejection. It's unknown if mushroom supplements are safe for pregnant or nursing women or very young children (culinary mushrooms are fine).

By the way, I'll be lecturing on medicinal mushrooms at the Telluride Mushroom Festival (August 21 to 24). For more, visit www.shroomfestival.com or call (303) 296-9359. ☺

coming up

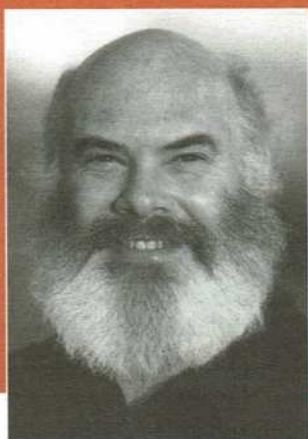
Getting started with tofu • The science behind meditation • Protecting your ears • All about pain relievers • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing*; *Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:

www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

September 2003

Dear Reader,
As of January 2006, food manufacturers must list the amount of trans fatty acids (TFAs) on packaged food labels. Currently, the easiest way to identify this heart-damaging fat (but not the amount) is to check the ingredients list for "partially hydrogenated oils" or "vegetable shortening."

Since I've long warned about the dangers of trans fats, I think this labeling is overdue but doesn't go far enough. Restaurant and fast food meals are exempt. And the labeling might be confusing: It won't indicate whether the amounts of TFAs listed are high.

Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

All about Pain Relievers: Not Just for Easing Aches	2
Take Control of TMD	3
All Ears: Help for Hearing and Other Ear Problems	4
Ask Dr. Weil: Seasilver, Dental X-Rays; Concussions; & More	6
Feeling Timid about Tofu?	6
Health in the News	7
Meditation and the Brain	8

Staying Healthy on Campus

This month, parents are sending their children off to college—many for the first time—where they'll be living independently and making their own health decisions. Since I teach at a university, I'm aware of the challenges that freshmen face, and I've compiled seven health tips to share with them.

Eat well. Today's meal plans offer much healthier choices—vegetarian options, salad bars, and fresh fruit—right alongside such high-fat fare as pizza, ice cream, burgers, and fries. It's up to you to choose your calories wisely. Some advice: Make time for breakfast, include calcium-rich foods to strengthen bones, and try not to munch on junk food when you are feeling stressed. I think it's fine to take a daily multivitamin as insurance, but it should not replace a sensible diet.

Hit the gym. It's easy to leave exercise off your "to do" list, but being physically active pays off by lowering stress, boosting energy, increasing concentration, and managing your weight. Exercise can be fun in college, where physical education classes like yoga, fencing, or ultimate frisbee are included in the price of tuition. To fit in fitness, you can also walk, bike, or rollerblade to class and choose the stairs over the elevator.

Catch some ZZZs. Studying, socializing, and having roommates can make it hard to get enough shut-eye. While sleep may seem like a low priority, not getting enough rest can affect your mood (you're crankier), your concentration, and your grades. Pulling all-nighters to cram for an exam robs your brain of the downtime it needs for memory retention. To sleep more soundly, avoid alcohol, caffeine, and heavy meals before bedtime and try using earplugs to shut out the noise of dorm life.

Manage your time. It's a constant juggling act—classes, papers, part-time jobs, sports, activities, and hanging out with friends. The key is to set your priorities and balance work and play. Make good use of the free half-hour here or the 15 minutes there, which can add up to a weekend night off. Don't leave things until the last minute, say "no" when your schedule is packed, and anticipate that tasks may take slightly longer than you originally planned.

Chill out. Being a student has its share of stresses, from tests and grades to peer pressure and dating. Not surprisingly, students under stress may be more susceptible to colds, flu, and strep throat. Yet, something as simple as taking a few deep breaths can help you calm down. Spending quiet time alone can soothe strained nerves, as can writing your thoughts in a journal or exercising to lower stress hormones.

Anticipate emotional adjustments. Homesickness, meeting new people, and having greater freedom to make choices about drinking, drugs, and sex can all be daunting to freshmen. Binge drinking is not a helpful coping mechanism, and there are high rates of depression and eating disorders on campuses. Occasional bouts of sadness and frustration are normal; however, your school probably has counseling services that provide free and confidential support if needed. A resident advisor or trusted professor can also lend an ear.

Learn about the meningitis vaccine. In my opinion, the risk of contracting meningitis is low, but I don't discourage students from getting vaccinated. Many schools recommend the shot if you live in the dorms, where your chances of contracting bacterial meningitis are greater if your immune system is rundown. (Learn more at the American College Health Association's website: www.acha.org.)

All about Pain Relievers: Not Just for Easing Aches

Deciding which pain reliever to use from the slew of possibilities can be enough to give you a headache. Say you suffer from arthritis: Should you choose a nonsteroidal anti-inflammatory drug (NSAID) such as aspirin, ibuprofen (Advil, Motrin), or naproxen (Aleve), or take acetaminophen (Tylenol), which relieves pain but doesn't reduce inflammation? Should you ask your doctor about prescribing a COX-2 inhibitor such as Celebrex or Vioxx, or take anti-inflammatory herbs like ginger and turmeric?

Let me try to guide you through the process of selecting a pain reliever. First, know that even over-the-counter pain medications carry risks. NSAIDs can cause stomach irritation and should be taken with food. And NSAIDs can cause gastrointestinal bleeding, most notably in the elderly, so people with a history of ulcers, bleeding disorders, or those on blood-thinning drugs like Coumadin should avoid them. Acetaminophen can cause liver damage if taken at higher-than-recommended doses or with alcohol. COX-2 inhibitors can ease inflammation and may be gentler on the stomach

than traditional NSAIDs, but they're expensive and can have other side effects, like coughing, fever, and a sore throat.

Still, pain relievers aren't your only option for feeling better. Mind-body approaches like guided imagery and hypnotherapy can modify the perception of pain, and acupuncture has been shown to benefit many painful conditions. That said, pain relievers can often be useful. Here's my advice.

Acute (short-term) pain: For swift relief of occasional aches and pains—a tension headache, for example—I think NSAIDs like aspirin, ibuprofen, or naproxen are your best bet. See which one of them is most effective for you, since individual responses can vary. Acetaminophen is a good alternative if you need to avoid NSAIDs or can't tolerate their side effects. I don't advise taking ginger or turmeric for acute pain, because these herbs act much more slowly than pain medication. Nor do I recommend using white-willow bark, the herbal remedy from which aspirin is derived: It's a less potent pain reliever and more irritating to the stomach.

Chronic pain: If you have arthritis or another chronic pain condition that involves inflammation, I'd try taking anti-inflammatory herbs such as ginger and turmeric before resorting to Celebrex, Vioxx, or even traditional NSAIDs. These herbs show promise in relieving pain and inflammation in much the same way as prescription COX-2 inhibitors, but without their side effects. One such product is New Chapter's Zyflamend, which contains ginger, turmeric, and other anti-inflammatory herbs; know that it can take two months to produce a full effect. Zyflamend is sold in health food stores; visit www.new-chapter.com to locate a retailer.

Allergic to Aspirin?

Is there an herbal remedy offering the same cardiovascular benefits as daily aspirin therapy for those allergic to aspirin? There's no good evidence that taking ginger (an herb that, like aspirin, has anti-inflammatory and blood-thinning properties) or white-willow bark will reduce the risk of heart disease or stroke. But the good news is that aspirin therapy may still work for you. I avoided aspirin for much of my life because I developed hives every time I took two standard tablets. When I became convinced of the health benefits of aspirin therapy, I tried again. I started with a very small dose—just one-quarter of a baby aspirin (20 mg) per day—and increased it by one-quarter baby aspirin each week, until I was taking 2 baby aspirins (for a total of 162 mg) a day. In this way, I developed a tolerance to the medicine and haven't had a problem with it since. If your allergy is mild, you may be able to ease your way into aspirin therapy as I did. I don't recommend this if you've previously had a serious allergic reaction to aspirin.

Uses Beyond Pain Relief

Pain relievers are no longer taken just for aches or fever. Researchers are turning up more diseases for which regular use of aspirin and other NSAIDs, as well as the herb turmeric, may have protective health effects. Even so, a healthy lifestyle including a wholesome diet and regular exercise is still the first line of defense against the conditions below. Consult your doctor before starting a daily aspirin regimen.

Heart attack and stroke. Of the 80 million aspirin tablets consumed daily in the United States, most are taken to prevent

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Cari Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERNS: Jennifer Cotie, Maggie Cramer
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamwey
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. ■ Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. ■ This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING: 42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.

WEBSITE: www.drweilselfhealing.com

CUSTOMER SERVICE: (800) 523-3296

ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.

SUBSCRIPTIONS: US \$29/yr; Canada \$36

BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

Take Control of TMD

The only joint in your body that orthopedists don't treat is the temporomandibular joint, which connects your lower jaw (mandible) to the temporal bone on the side of your head. Since this joint has teeth attached to it, you'll need to see your dentist if you have painful cycles of muscle spasm and inflammation in the jaw. This condition, once known as TMJ syndrome, is now called TMD for temporomandibular disorders, a group of problems that affect the jaw and surrounding neck and facial muscles when you chew, swallow, talk, and yawn. Other complaints include jaw pain when you wake up and a clicking or popping sound when you open your mouth. I think TMD is often overdiagnosed or misdiagnosed because some of its symptoms are similar to those of tension headaches, toothaches, earaches, sinus troubles, or even stress.

Several factors can contribute to TMD. Habits such as nighttime teeth grinding, gum chewing, and nail biting may irritate the jaw. TMD can also be aggravated by stress, bad posture, poor tooth alignment, and injury such as a car accident or osteoarthritis. To reduce discomfort, here's my advice for treating TMD.

Short-term relief. When TMD pain flares up, apply ice or moist heat to your jaw, whichever feels better. Rather than using prescription muscle relaxants, I suggest taking 1,000 mg of both calcium citrate and magnesium at bedtime instead, and 500 mg of each 12 hours later. Stay on this regimen for a few weeks to months if symptoms persist. Rest your jaw by temporarily avoiding hard, crunchy, or chewy foods. Try limiting caffeine to see if your symptoms subside, and don't smoke since nicotine may reduce the blood supply to the joints.

One session with a physician trained in cranial osteopathy, an approach that applies gentle hands-on pressure to the head, may make a difference, while some TMD patients prefer chiropractic manipulation. Research suggests that six weekly acupuncture sessions may effectively ease TMD. Also, you can massage your achy jaw and neck muscles, or visit a massage therapist.

Long-term strategies. I encourage people with TMD to practice relaxation techniques regularly, such as breath work and guided imagery, since muscle tension can intensify jaw pain. Other approaches worth exploring include biofeedback training, which can help relax muscles in the head and face, and Bonnie Prudden Myotherapy, a form of bodywork that releases muscle tension. (To find a certified practitioner, contact www.bonnieprudden.com or 800-221-4634.) Nighttime teeth grinders can try a specially fitted mouthguard from their dentist or a plastic one from a sporting goods store. And preliminary research found that Botox injections reduced TMD pain, but the shots need to be repeated every few months and can be costly. ☺

heart attack and stroke. We've long known that aspirin helps protect against cardiovascular disease by reducing the clotting tendency of the blood, and scientists now believe the drug's anti-inflammatory effects may also play a role—recent studies have linked high blood levels of C-reactive protein (a marker of inflammation) with increased risk of heart attack and stroke.

Heart experts recommend daily aspirin therapy to people who have already had a heart attack, stroke, transient ischemic attacks ("mini-strokes"), or angina, and for those who have undergone heart bypass surgery or angioplasty. They also suggest that people at increased risk for heart disease consider aspirin therapy: These include men over 40, postmenopausal women, and other adults with high cholesterol, high blood pressure, diabetes, or a history of smoking. The typical daily dose is one or two baby aspirins (81 mg each). I take 162 mg a day, as well as a booster dose of 325 mg (one regular aspirin) once every two weeks instead of my usual dose. Such booster doses have been shown to enhance the anticlotting effect.

Cancer. A growing body of evidence suggests that regular use of aspirin and other NSAIDs may help protect against many types of cancer, perhaps by inhibiting hormonelike substances called prostaglandins that control cell proliferation. Research shows that aspirin and other NSAIDs may reduce the risk of colorectal, esophageal, lung, and prostate cancer. According to other studies, aspirin and ibuprofen may reduce the risk of breast cancer, and aspirin may reduce the risk of ovarian and pancreatic cancer as well as adult leukemia. If you have a personal or family history of these malignancies, you might discuss daily low-dose aspirin therapy with your doctor. (I'd avoid taking ibuprofen preventively because it can be harder on the stomach than low-dose aspirin.)

Also, test-tube and animal studies suggest turmeric may help prevent a number of cancers, including breast, colon, stomach, and skin cancer, but there has been little research in humans. If you are at risk for any of these cancers, you might consider supplementing with turmeric. (It's fine to take both turmeric and low-dose aspirin on a preventive basis.) One reliable brand is New Chapter's Turmericforce, sold in health food stores. I suggest taking one 400-mg capsule twice a day.

Alzheimer's disease. Epidemiological studies have linked the regular use of NSAIDs with a reduced risk of Alzheimer's. A recent lab study showed that ibuprofen and naproxen (but not aspirin) bind to the abnormal protein deposits, or amyloid plaques, found in the brains of Alzheimer's patients, and may help dissolve plaques and prevent the formation of new ones (*Neuroscience*, March 31, 2003). The anti-inflammatory effects of NSAIDs may also help prevent Alzheimer's. Yet, a recent trial of naproxen and Vioxx found that neither drug slowed mental decline in Alzheimer's patients (*Journal of the American Medical Association*, June 4, 2003). Also, turmeric has been shown to prevent amyloid-plaque formation in rats. This may be one reason why the elderly in India, where turmeric-rich curry dishes are popular, have low rates of Alzheimer's.

Researchers believe clinical studies (now under way) are needed to tell if the benefits of taking NSAIDs for Alzheimer's prevention outweigh risks like gastric bleeding. In the meantime, people with a family history of Alzheimer's might consider supplementing with turmeric, which lacks the side effects of NSAIDs. I suggest taking 400 to 800 mg per day, and it's fine for adults to start taking turmeric at any age. ☺

FAST FACT

Stomach bleeding caused by NSAIDs may account for some 16,500 deaths and 103,000 hospitalizations per year in the United States.

All Ears: Help for Hearing and Other Ear Problems

Your ears take in the everyday noises of life and your brain interprets them, from whispers to ringing telephones to the barking of dogs. And with their intricate structure, the ears are part of an incredible sound-receiving and processing system that should provide you with a lifetime of good service. But there's no guarantee, and sometimes as you get older, especially if you develop specific health problems, your hearing may be compromised, and you find yourself in a much quieter world.

Your ears do more than help you hear. They also regulate your sense of balance and are extremely sensitive to the movements of your head and the rest of your body. When you feel dizzy—and it's not a side effect of alcohol or another drug—it's typically because of sensations arising in the inner ear. In addition, the ears are closely interconnected with the nose and throat, with the respiratory system via the sinuses, and with the nervous system.

The Insider's Guide to Inner Ear Disorders

The inner ear is an amazing network of snail-shaped canals, fluid-filled chambers, and hair cells that transfer sound vibrations and changes in position to nerves that connect with the brain. Such an arrangement makes it possible for the inner ear to function as the body's hearing and balance center.

In a previous article (see the November 2001 issue), I discussed how to prevent and treat middle ear infections in children and "swimmer's ear" in adults. This time, I'll offer my advice for some inner ear problems and hearing loss. Some of the problems have symptoms in common such as dizziness

and ringing in the ears, making it hard to distinguish one condition from another. So it's best if you let an ear, nose, and throat specialist, an otolaryngologist, evaluate you and make an accurate diagnosis.

Tinnitus: From the Latin root meaning "to tinkle like a bell," tinnitus is an annoying condition where there's buzzing, ringing, or roaring in your ears. Generally, the noise that bothers you is not audible to anyone else. Tinnitus is often brought on by repeated exposure to loud noise, while factors such as wax buildup, an ear or sinus infection, allergies, or jaw misalignment may also contribute to it. It can be a side effect of taking certain medications and may be worse in people who also have heart disease or high blood pressure, conditions that can reduce blood circulation to the inner ear.

My advice: Since emotional stress and muscle tension in the head and neck may aggravate tinnitus, I definitely recommend relaxation techniques. Yoga can be beneficial, as can other postural approaches, such as the Alexander Technique. In addition, I suggest trying acupuncture and cranial osteopathy. As for supplements, I still recommend a trial of the herb *Ginkgo biloba* to improve blood circulation to the ear, even though recent research did not find it effective for tinnitus. Take 60 mg three times a day for two months to see if it helps. Since ginkgo can thin the blood, avoid this herb if you are also on prescription blood thinners such as Coumadin.

Ménière's disease: Possibly caused by excess fluid in one compartment of the inner ear that leads to swelling and pressure there, Ménière's symptoms may come and go, and include waves of vertigo (the experience of things spinning around you—not the same as dizziness) as well as nausea, vomiting, and hearing difficulties.

My advice: All the treatments listed above for tinnitus also apply to Ménière's disease. I've also heard of patients who have benefited from Reiki, a hands-on form of energy medicine, for flare-ups of Ménière's. In addition, I would avoid smoking, caffeine, alcohol, and monosodium glutamate (MSG), all of which may worsen symptoms. Since Ménière's is linked to fluid buildup, restricting salt in the diet may be valuable. I would first explore natural approaches before turning to medication, which may provide only temporary relief of symptoms.

Labyrinthitis: This condition is caused by an inflammation of the labyrinth, a system of tubes and sacs found in the inner ear, which may result from a bacterial or viral infection. Symptoms include dizziness, severe vertigo, nausea, and trouble with hearing and balance.

My advice: If the infection is believed to be viral, you'll need to let the illness

Taming Troubles from Ear to Ear

Earwax buildup. First try over-the-counter mineral oil eardrops to soften wax, then carefully wash out the ear with a syringe filled with lukewarm water. If the buildup persists and blocks hearing, your doctor can flush out the wax. I don't recommend using so-called ear candles to remove wax. They're ineffective and may cause burns.

Ears and altitude. To pop plugged ears, try yawning, swallowing hard, chewing gum, or sucking on sugarless hard candies. You can also pinch your nostrils closed and blow very gently out of your nose. If you have sinus or nasal congestion, consider taking a decongestant or an antihistamine before flying to lessen any potential discomfort.

Foreign objects in the ear. If an insect gets stuck, pour warm mineral or olive oil into the ear, so the bug stops moving around. Then your doctor can remove the insect. If a pebble or toy is trapped, tilt the head and gently shake it (don't hit the head). Avoid using a cotton swab, which may push the object deeper into the ear canal. Gently grasp the object if visible and remove it, or let your doctor safely do so.

Perforated eardrum. Leave it alone and allow time—usually weeks, possibly months—to heal. Protect the ear from water or additional injury. Sometimes your doctor may apply an internal patch to the tear, before surgery is considered.

ASK DR. WEIL

Seasilver; Dental X-Rays; Concussions; and More

My son got a concussion playing football and is having memory and concentration problems. What can I do?

A concussion—a blow or jolt to the head that can disturb normal brain function—can trigger temporary memory loss, concentration problems, headaches, and neck pain that may last for weeks or months. Repeated concussions can cause permanent brain damage and even death, so you and your son should first discuss whether he should keep playing football, one of the top sports associated with head injury (others include boxing, hockey, soccer, and gymnastics).

It's important that your son gets enough rest to give his brain time to heal. He should eat a healthy diet but avoid alcoholic beverages, which can slow recovery. He can improve his concentration and memory by doing one thing at a time and making notes of things he needs to remember. I also recommend cranial osteopathy, a hands-on technique involving

gentle manipulation of the head and other parts of the body. It's believed to help stimulate the flow of the cerebrospinal fluid that bathes the surfaces of the brain and spinal cord and to restore normal function of the cranial (skull) bones, both of which may speed the brain's recovery from trauma. To locate a practitioner, send a SASE to The Cranial Academy, 8202 Clearvista Parkway #9-D, Indianapolis IN 46256.

What do you think of a supplement called Seasilver?

I don't recommend that anyone take Seasilver, a liquid supplement containing vitamins, minerals, and amino acids. Seasilver—like colloidal silver, a similar supplement that I also advise against—promotes silver as one of its “beneficial” elements. But the human body doesn't need silver. Manufacturers claim Seasilver is a safe and effective treatment for 650 diseases, including cancer, and can help promote weight loss

NUTRITION

Feeling Timid about Tofu?

I think people have misconceptions about tofu, that it's scary, squishy, or weird, and they're hesitant to try this versatile soy food. Truth is, tofu doesn't taste like much, but it is able to absorb the flavors around it. That's why tofu tastes best to Westerners when added to other foods or cooked with strong seasonings. Once you familiarize yourself with tofu, it can become a healthful, meatless addition to your diet.

Why tofu? Tofu is a rich source of vegetable protein. A serving of it has a comparable amount of protein to a serving of meat, with no cholesterol and significantly less fat and fewer calories. Tofu can also be a good source of calcium, if it's made with calcium chloride; check the ingredients label. And tofu is rich in isoflavones, plant estrogens that can lower cholesterol, may protect against breast and prostate cancer, and help ease menopausal symptoms.

At the store. When shopping, you will find two types of tofu in soft, firm, and extra-firm consistencies. Water-packed tofu is found in the refrigerated produce section. This product is firm enough for frying, grilling, and sautéing.

Soft has a custard-like texture and is best scrambled, like eggs, or used in desserts. Firm, or regular, is an all-purpose tofu good for stir-fries. Extra-firm can be marinated, grilled, or fried without breaking. If you're not sure how to prepare tofu, try Tofu Mate prepackaged seasoning blends and recipes.

Silken tofu doesn't need refrigeration and can be found elsewhere in the store. This tofu is delicate and smooth, and best used when you want tofu to disappear, in smoothies, mayonnaise, creamy dips, or baked goods.

I like already-baked and flavored varieties of tofu that come in vacuum-sealed packages, like Soy Deli brand. These convenience foods are a great choice for beginners. You can find barbecue and Thai flavors and add them to recipes. They can also be sliced and used right from the package like cold cuts.

At home. For water-packed tofu, drain the liquid and press the tofu between paper towels or dishcloths to force out excess moisture; this allows seasonings to be better absorbed. Try slicing or crumbling the tofu into smaller pieces and sautéing it in olive

oil until slightly brown. If marinating, bathe the tofu in sauce and refrigerate it for no more than an hour before cooking to maintain its texture.

You can use tofu as a substitute for animal products like cheese or eggs. To replace ricotta in recipes, mash a similar amount of regular tofu with a fork and add a few teaspoons of lemon juice. To make scrambled tofu, crumble and sauté soft or regular tofu with spices or with a Tofu Mate “Breakfast Scramble” seasoning packet. For baking, use two ounces of puréed silken tofu to replace one egg.

Tofu tips. Here are more suggestions for using tofu:

- Order tofu at an Asian restaurant to taste how it's traditionally prepared. Then try a cookbook like *This Can't Be Tofu!* by Deborah Madison (Broadway Books, 2000) to make similar recipes using flavors such as curry, ginger, and soy sauce.

- Water-packed tofu is perishable: If you change the water every day and keep it refrigerated, it will last one week.

- For an easy tofu sandwich filling, drain regular tofu and mash it in a bowl. Add turmeric, prepared mustard, pickle relish, celery, onion, parsley, paprika, and salt to taste (or use Tofu Mate “Eggless Salad” seasoning mix). ☺

run its course without using antibiotics, drugs that will only help if the cause is bacterial. A medication such as the antihistamine meclizine (Antivert) is sometimes prescribed for severe vertigo since it may ease this symptom. If your symptoms are not responding to medication, I would recommend trying acupuncture, cranial osteopathy, and postural work such as yoga or the Alexander Technique.

Benign paroxysmal positional vertigo (BPPV): This is a sudden spinning sensation that's triggered by changes in position of the head—for instance, when it's tipped back for a shampoo at a salon or as you reach up to a high shelf. These episodes of dizziness last about 30 seconds and are also common when rolling over in bed or getting up in the morning. Symptoms are often present for a few weeks, then clear up, and later return again. More common as you get older, or following head injury or infection, BPPV may be caused by small calcium crystals lodging in the inner ear.

My advice: BPPV may resolve on its own, but if not, the most effective treatment that I know is to have a trained physician or physical therapist perform the Epley maneuver, a gentle series of simple head and body movements designed to help reposition calcium crystals in the inner ear. The Epley maneuver has a high success rate of curing BPPV in just a session or two. (For more on the Epley maneuver, see www.earinfosite.org.)

Acoustic neuroma: This slow-growing, nonmalignant tumor develops within the inner ear. Also known as vestibular schwannoma, this rare tumor can press on facial, balance, and hearing nerves. Symptoms such as hearing loss in the affected ear, ringing in the ears, and dizziness resemble other inner ear disorders, sometimes making early detection of the tumor difficult.

My advice: Radiation therapy may be used to shrink or limit tumor growth. Small tumors can be monitored or surgically removed and hearing may be preserved. Surgical damage to the nerves involved with facial muscles and hearing is more common with the removal of large tumors, where the procedure is often more complicated.

Hearing about Your Aging Ears

Chances are, if you have age-related hearing loss, you were not the first to notice it. In all likelihood, someone else let you know that you were playing the TV or radio too loud, you didn't answer the doorbell or phone, or you frequently ask people to repeat what they've said. When hearing loss is linked with aging, it's often gradual, and there's a tendency to deny it.

Age-related hearing loss typically begins after age 60, seems to be more noticeable in men than women, and may run in families. As you get older, it may be hard to hear high-pitched tones, such as women's and children's voices, and certain sounds like the consonants *s*, *t*, *k*, *p*, and *f*. Such changes

are normal and may occur because the tiny hair cells in your inner ear, which help to pick up sound vibrations and forward them to the brain, begin to deteriorate. While high-frequency hearing loss is found in many people as they age—at least one in four people between age 65 and 75 and nearly half of those over 75 have some difficulty—it need not progress to a disabling point where hearing troubles can make an older person feel frustrated, isolated, and lonely.

You can slow down or possibly delay age-related hearing changes through your lifestyle habits. Smokers, regardless of their age, are more likely to become hearing impaired, and even those exposed to secondhand smoke up their risk since tobacco

smoke may have toxic effects on the hair cells involved in hearing. Be aware that medications, particularly some antibiotics and chemotherapy agents, can damage the ear and result in hearing loss. As for supplements, one study found that B-vitamin deficiency—specifically, low blood levels of B-12 and folate—may be linked to age-related hearing losses, while a second study found no such evidence. I do think that taking antioxidants on a daily basis (vitamins C and E, mixed carotenes, and the mineral selenium) may help protect your ears against the oxidative stress of aging.

Perhaps the most important way to preserve your hearing is to avoid excessive noise exposure throughout your lifetime. Obviously, noise-induced hearing loss is a potential occupational hazard among carpenters, plumbers, miners, musicians, construction and factory workers, as well as those with on-the-job exposure to sirens, aircraft, or explosives. What's more, if your hobbies include regularly listening to loud music, motorcycle riding, jet skiing or snowmobiling, or using loud yard equipment or power tools, you can be putting your ears at risk if you do not wear protective devices such as earmuffs or earplugs during these activities. It's the repeated exposure to loud noise and the close proximity to its sources that are most damaging to the ears. Because noise- and age-related hearing loss tends to be permanent, you must take preventive action.

The American Speech-Language-Hearing Association recommends that adults have their hearing screened by an audiologist, a health professional who can evaluate hearing, at least

once every 10 years until age 50, then every three years after that. Don't let vanity cause you to ignore a hearing problem or be reluctant to get a hearing aid, if needed. I think today's hearing aids are less noticeable and more technologically sophisticated, but you'll need to have realistic expectations, and using one may take some getting used to. A hearing aid won't cure your hearing loss, but it can improve your hearing and listening skills. An audiologist can help you to select a model that's right for your budget and lifestyle, and discuss how to care for it and troubleshoot problems. (For more on hearing aids, see www.nidcd.nih.gov and www.asha.org.)

Can You Hear Me Now?

These tips can help you communicate better with someone who's hard of hearing.

- **Face the person and minimize background noise, such as the TV or radio. If in a noisy place, move closer while talking.**
- **Speak slightly slower and louder than usual, but don't shout. Facial expressions and hand gestures can also help convey your meaning.**
- **Have patience and rephrase, rather than repeat, what you said.**
- **Still not understood? Write it down. Perhaps the person's hearing aid is not turned on, needs a new battery, or was not properly fitted.**

FAST FACT

By age 25, the average carpenter has the same hearing as a 50-year-old person who has not worked around hazardous noise.

and reduce stress. They also say the supplement's users don't need to take vitamins and minerals from any other source.

I say, Nonsense. Seasilver's broad health claims and reliance on one supplement to maintain health disturb me. (It's unclear if Seasilver's nutrient levels are similar to those in a multivitamin.) Also, Seasilver seems to have been sold only through multilevel marketing, a sales method I do not support. The Federal Trade Commission and the Food and Drug Administration recently charged Seasilver's manufacturers and distributors with making deceptive medical claims, and have shut down its sale. My bottom line: I see no silver lining in Seasilver. It's an expensive and unnecessary supplement.

What's your opinion of the routine x-rays taken in dentists' offices? They seem unnecessary to me.

Dental x-rays can sometimes be useful, but I do share your worries. It's true that the amount of radiation you receive from a full set of dental x-rays is about the same as or even less than what you'd get from a day's worth of sun exposure. But any dose of radiation, no matter how small, adds to your cumulative level and therefore your risk of cancer. X-rays can reveal cavities, infections, and tumors in the teeth and gums, but your dentist may be able to identify such problems with an oral examination alone. Unless you have obvious tooth or gum problems, I would only allow dental x-rays to be done every two years or so. When you get x-rays, make sure your stomach, chest, and neck are protected with a lead apron.

My husband eats a lot of pickled herring. What's its nutritional value?

Pickled herring is higher in total fat than some other types of fish, but much of it is the healthier monounsaturated kind. It's also high in protein and is an excellent source of beneficial omega-3 fatty acids. One ounce of pickled herring has about 75 calories and 5 grams of fat (calories and fat would be higher with a sour cream sauce). Pickled herring has been marinated in salt, vinegar, spices, and sometimes sugar before it's often placed in a sour cream or wine sauce. High salt content is a drawback, and for some people, pickled herring may trigger a migraine. It should also be avoided by anyone taking MAOI (monoamine oxidase inhibitor) antidepressant drugs because its high content of tyramine (an amino acid) can interact with these drugs and raise blood pressure.

Would you recommend getting a tetanus vaccine every 10 years? My doctor suggested I get one.

In my opinion, it's a good idea to get revaccinated for tetanus every 10 years. Tetanus is an infectious disease caused by spores of a bacterium, most often found in soil, that typically enters the body through a wound. Once inside the body, the spores produce a toxin that can lead to nervous system disorders and even death. Almost all cases of tetanus occur in people who have never been immunized or are not up-to-date with their vaccinations. Once you've had the vaccine, if you receive a deep or dirty puncture wound and have not been immunized in the past five years, I'd recommend getting a booster shot. Otherwise, once every 10 years is enough. ☺

HEALTH IN THE NEWS

This Just In . . .

Vegetarian Diet as Good as Statin Drugs?

A vegetarian diet may lower cholesterol as much as statin drugs, suggests a small study. Forty-six adults with high cholesterol were randomly assigned to one of three groups. One group ate a vegetarian diet low in saturated fat, while the second ate the same diet and also took the cholesterol-lowering drug lovastatin each day. The third group ate a vegetarian diet rich in foods known to have cholesterol-lowering properties: soy foods, high-fiber foods (like oats and barley), almonds, and a cholesterol-lowering margarine containing plant sterols. After one month, the third group showed an average decrease of nearly 29 percent in their levels of LDL ("bad") cholesterol, about equal to the 31 percent reduction seen in the low-fat diet plus lovastatin group. In contrast, those who only ate a low-fat meatless diet had just an 8 percent drop in LDL levels. (*Journal of the American Medical Association*, July 23, 2003)

Comment: While still preliminary, these findings suggest that dietary measures hold promise as an alternative to drug treatment for lowering cholesterol. But the foods used in this study aren't the only ones that can lower cholesterol; others include olive oil, garlic, chile peppers, shiitake mushrooms, and green tea. I'm not a proponent of cholesterol-lowering margarines: Like other margarines, they contain processed oils that may have unhealthful effects on the body. Instead, I suggest trying Spectrum Spread, made from expeller-pressed canola oil and found in the refrigerated section of most health food stores.

Warding Off Alzheimer's. Eating fish and other sources of omega-3 fatty acids as well as maintaining a healthy weight as you get older may reduce the risk of Alzheimer's disease, according to two recent studies. In one study, nursing home residents who ate fish at least once a week were 60 percent less likely to develop Alzheimer's than those who rarely or never ate fish. Total intake of omega-3s (which these seniors also got from nuts and oil-based salad dressings) was linked with a lower risk of Alzheimer's as well. Omega-3s are important components of brain cells and may protect them from the abnormal changes seen in Alzheimer's. (*Archives of Neurology*, July 2003)

Another study found that women who were overweight at age 70 were more likely to develop Alzheimer's disease in their later years, and the risk was greatest for women who were most overweight. It's unclear if excess weight poses a similar threat to men. Being overweight may affect Alzheimer's risk by promoting heart disease and diabetes, two conditions that other research has linked with a higher risk of Alzheimer's. (*Archives of Internal Medicine*, July 14, 2003) ☺

FAST FACT

Seniors who live near parks or tree-lined streets may live longer, possibly because they're more likely to move around outside.

Meditation and the Brain

When I first started practicing meditation more than 30 years ago, it was still considered part of the 1960s counterculture. Today, meditation—which is simply directed concentration and involves focusing your awareness on the breath, a repeated word or phrase, or another object of perception—is entering the medical mainstream, thanks to research showing it can benefit health concerns ranging from stress and anxiety to atherosclerosis and chronic pain. And now, a high-tech study may help explain why this low-tech approach can have such powerful effects.

The study, recently published in the July/August issue of *Psychosomatic Medicine*, was led by Richard Davidson, PhD, director of the Laboratory for Affective Neuroscience at the University of Wisconsin at Madison, and my friend Jon Kabat-Zinn, PhD, founder of the respected Stress Reduction Clinic at the University of Massachusetts Medical Center in Worcester. Earlier research by Dr. Davidson, using brain-imaging technology and EEG readings of brain electrical activity, suggested that each person's brain has a natural "set point" for good versus bad moods. People who are generally happy and calm typically show greater activity in the *left* side of the brain's frontal area compared with the right side. In contrast, those more prone to sadness, anxiety, or worry typically show more activity on the *right* side of the frontal area and less on the left. Life's ups and downs may alter your ratio of left versus right activity for a while, but it will tend to return to its usual level.

What Drs. Davidson and Kabat-Zinn discovered is that meditation can apparently shift this emotional set point in a more positive direction. The study looked at stressed-out volunteers from a biotechnology firm, who were randomly assigned to one of two groups. A group of 25 people attended eight weekly classes in mindfulness meditation (which involves remaining aware of bodily sensations and thoughts, without passing judgment on them) and participated in a seven-hour retreat. They were also asked to practice mindfulness meditation for an hour a day, six days a week. The 16 people in the control group didn't receive meditation training until the study was completed.

The researchers found the meditation group had a significant increase in activity in the left side of the brain's frontal area, and they also reported feeling more positive emotions in their daily life. (The control group didn't show these changes.) In addition, the meditation group showed enhanced immunity: They produced more antibodies in response to a flu shot than did the control group. So meditation may not only make you happier but may also keep you healthier.

Extraordinary Effects of Long-Term Practice

While this new study revealed that even novice meditators can reap health benefits, other recent research has shown some extraordinary effects from long-term meditation practice. When Dr. Davidson had the chance to test a senior Tibetan Buddhist monk at his laboratory, he found that the monk's brain had the highest ratio of left versus right activity out of all 175 people tested, suggesting an unusual degree of emotional contentment. Paul Ekman, PhD, a professor of psychology at the University of California Medical School in San Francisco, tested the startle reflex of a different Buddhist monk by exposing him to noises as loud as a gunshot: While meditating, the monk was able to suppress this reflex, his face not moving a muscle. This was an unprecedented display of mental control over a supposedly automatic response.

Dr. Ekman had previously developed a test of how well someone can read other people's emotions from rapid, subtle changes in facial expression (the test involves watching a videotape of these fleeting expressions and attempting to identify the correct emotion). Most people do poorly on the test, but when Dr. Ekman tested two advanced Buddhist meditators, they got nearly perfect scores. This suggests meditation may actually sharpen perception and enhance empathy.

Impressed by these findings, Dr. Ekman is helping design a program called Cultivating Emotional Balance that includes training in both meditation and Western psychological techniques (like conflict resolution skills), so people can better manage their emotions and relationships. A pilot version of the project has begun in the San Francisco Bay area, and researchers hope to do a controlled trial that will evaluate whether the program improves emotional and social skills as well as boosts immune function.

These early explorations of meditation's effects have piqued the interest of other researchers. On September 13 and 14, the Dalai Lama and eminent Western scientists will meet at the Massachusetts Institute of Technology to discuss the latest findings and future research directions.

I hope all this research inspires more people to take up meditation. You can likely find a beginner's class at a local hospital, community college, or adult education center, or consider listening to the instructional recording I made with Dr. Kabat-Zinn, called *Meditation for Optimum Health*. (To order, call 888-337-9345.) And these findings should encourage those who are already meditating to deepen their practice, perhaps by joining a meditation group that meets regularly. The time you spend quieting your mind may literally change your mind for the better. ☺

coming up

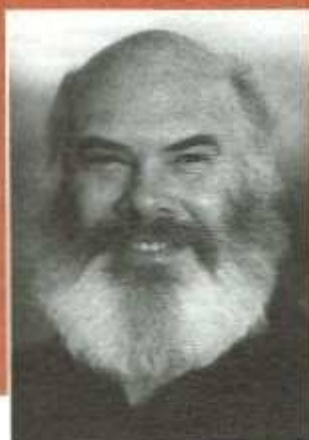
How safe are statins? • Environmental health concerns • Men's mental health • Digestive supplements • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing*; *Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:

www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



visit our website:
www.drweilselfhealing.com

Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

October 2003

Dear Reader,

Students are now back in school, where they could learn valuable lessons about good health. Sadly, this isn't always the case. If junk food and soda are pervasive in your schools, resist their presence by packing your child's lunch or working to get the cafeteria to provide healthier choices. Also, schools should be enthusiastically encouraging students to be more physically active.

Learning is a lifelong process that continues outside of formal classrooms. Whether it's learning how to do yoga or send email, keeping both your body and mind active may add more years to your life.

Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Fear Factor: Environmental Rumors and Realities	2
Sweet Nothings	3
Men and Depression	4
Ask Dr. Weil: Easy Bruising; Quorn; Tonsillitis; and More	6
Showing Your True Colors	6
Health in the News	7
13 Digestive Remedies	8

How Safe Are Statins?

Cholesterol-lowering statin drugs (like Lipitor and Zocor) are the top-selling class of prescription drugs in the United States, and I don't think it's just a result of persuasive marketing efforts. Statins are by far the most effective cholesterol-lowering drugs. By blocking an enzyme the liver needs to make cholesterol, and by increasing the liver's ability to remove LDL ("bad") cholesterol from the blood, statins can cut LDL cholesterol by 20 to 60 percent. These drugs also reduce elevated triglyceride (blood fat) levels and increase HDL ("good") cholesterol modestly. And statins reduce inflammation in the arteries, now believed to be a major risk factor for cardiovascular disease.

Thanks to these effects, statins have been shown to reduce the risk of heart attack, stroke, and death from cardiovascular disease, both in people with high cholesterol and in those with normal cholesterol levels who have other risk factors for cardiovascular disease like high blood pressure or diabetes. Hailed as possible miracle drugs, statins have also shown potential for reducing the risk of Alzheimer's disease, slowing the progression of multiple sclerosis, and protecting against bone fractures.

The Downside of Statin Drugs

Despite all the good news, I believe statins also have some drawbacks. For one, they're expensive. And while these drugs are well-tolerated by most people, they can have side effects. About 5 percent of statin users get muscle aches and pains. In rare cases, muscle tissue actually breaks down, a condition called rhabdomyolysis, which can lead to kidney failure and death. (In 2001, the statin drug Baycol was taken off the market after it was linked to 31 deaths from

rhabdomyolysis.) Other possible side effects include peripheral neuropathy (nerve damage that causes numbness or tingling in the hands and feet) and disturbances in liver function. Plus, there are anecdotal reports of memory loss and mood changes associated with statin use.

The drugs may have other unintended consequences. Because statin users can see their cholesterol levels drop sharply without necessarily eating a better diet or being more active, these drugs may *reinforce* bad health habits, and thus promote diabetes and other weight-related diseases. Also, because doctors are better trained to prescribe pills than to educate patients about leading a heart-healthy lifestyle, I believe many doctors don't give diet and exercise an adequate chance to bring cholesterol down before offering statins. In last month's newsletter, I discussed a study suggesting that a vegetarian diet high in cholesterol-lowering foods (such as soy foods, oats, and nuts) may decrease cholesterol levels as much as statins.

My advice: If you're newly diagnosed with high cholesterol, follow my dietary, exercise, and other lifestyle measures (see the December 2002 issue) before turning to statins or even cholesterol-lowering supplements such as red yeast rice. If you're on a statin, I recommend the same lifestyle measures, which may reduce your dependence on the drug and are good for overall health. Also, contact your doctor if you have any of the possible side effects mentioned above. Your doctor may lower your dosage or switch drugs. Statins are not recommended for people with liver problems, and anyone taking these drugs should have periodic blood tests for liver function. And because statins suppress the body's formation of Coenzyme Q10, take 60 to 90 mg of CoQ10 daily in soft-gel form when taking these drugs. ●

HEALTHY LIVING

Fear Factor: Environmental Rumors and Realities

With issues of national security being questioned and infectious diseases from SARS to monkeypox making headlines, your home might seem like the safest place to be. So why not unwind there by taking a hot bath or shower, lighting a few candles, and climbing into a freshly made bed? Perhaps, if you're to believe a spate of negative news reports and scare emails about chlorinated water, leaded candle wicks, and formaldehyde-laced sheets, your home may not seem so safe a haven. Add some stranger-than-fiction stories about menacing toxic mold and poisonous chemicals in clouds, and you're probably ready to head for the hills. To put all this into its proper perspective, I'll take a look at some common environmental health worries and sort out what's real cause for concern from what's exaggeration.

RUMOR Dry-cleaning your clothes causes cancer.

▶ REALITY: When clothes are dry-cleaned, they're soaked in a chemical solvent that prevents the shrinking, stretching, and fading that can occur with washing. Unfortunately, the solvent used by most dry cleaners is perchloroethylene ("perc"), a toxic chemical. While it's unclear how much of a risk perc poses to people who have their clothes dry-cleaned, it's been shown to cause cancer in animals and in dry-cleaning workers and can pollute drinking water when disposed of.

I'm pleased that a number of dry cleaners have phased out perc and are using less toxic alternatives instead, like liquid carbon dioxide or silicone-based solvents (you can look for shops with these options at www.hangersdrycleaners.com and www.greenearthcleaning.com). If you must use traditional dry cleaners, your clothes shouldn't smell of chemicals when you get them home. If they do, hang them outdoors to air out.

RUMOR "Toxic black mold" in homes may be responsible for health problems ranging from allergies to brain damage.

▶ REALITY: So-called toxic black mold is a greenish black fungus known as *Stachybotrys chartarum*, which grows on materials such as wet fiberboard, drywall, and paper. Some say that when this mold is present in a home, it causes allergic reactions, memory loss, learning disabilities, fatigue, joint pain, and even brain damage. This "mold hysteria" has resulted in huge insurance claims and pricey lawsuits against building

companies and real estate agents, and often prompts families to completely renovate their homes or move out. Although *Stachybotrys* does emit potentially harmful spores, it's relatively uncommon and there's no good scientific evidence to back most of the alarmist claims being made about it. It's more likely that one or more of the many other types of less-harmful molds are responsible for allergic reactions. You can prevent mold in general by keeping your home clean and dry, using a dehumidifier in damp basements and a fan in bathrooms, and throwing away water-damaged items.

RUMOR Plastic bottles leach chemicals into the water they hold.

▶ REALITY: There's some evidence that water bottles made for one-time use—most of which are made from soft plastic—can degrade when stored near sunlight or rinsed in hot water and reused, potentially leaching chemicals into the water they contain. Although we don't yet know how much of a risk this poses to human health, some of the chemicals that make up soft plastic bottles have been linked to cancer and reproductive abnormalities in animals. If you want water on the go, keep filtered tap water in reusable, harder plastic travel or sports bottles, which are less likely to leach chemicals.

RUMOR Scented candles are bad for your lungs.

▶ REALITY: Because of the fragrant oils they contain, scented candles create more soot when burned than unscented varieties. Some researchers say these soot particles are similar to those produced by diesel fuel exhaust, which can lodge deep in the lungs and cause respiratory problems. I think scented candles contribute to indoor air pollution and I don't like the way most of them smell, so I prefer unscented beeswax varieties instead. I wouldn't worry as much about candlewicks made from lead—a big concern a few years ago—since they have been banned in this country and most major candle manufacturers don't use them.

RUMOR Bed sheets emit poisonous fumes.

▶ REALITY: Permanent-press sheets, clothing, and curtains are treated with formaldehyde, a colorless gas that keeps them from needing ironing. These products can give off low levels of formaldehyde fumes, which may irritate your nose and

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Carl Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERNS: Jennifer Coie, Maggie Cramer
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McGloskey
CUST. SERVICE COORDINATOR: Barbara Hamway
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Self Healing

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING: 42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 523-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

throat, make your eyes water and burn, and cause wheezing, coughing, nausea, and rashes. Higher concentrations may trigger asthma attacks or even promote cancer. To be safe, I'd avoid products labeled "permanent press" altogether, or cut down on formaldehyde levels by washing new permanent-press goods before use, since formaldehyde content decreases with repeated washings.

RUMOR *Your shower water can cause cancer.*

► **REALITY:** Up to 80 percent of Americans drink water containing chlorine, and this chemical is also found in shower water, from which it can be absorbed through the skin. In fact, it's been estimated that the amount of chlorine absorbed by your body during a 10-minute shower is the equivalent of drinking two gallons of chlorinated tap water. Hot water may be more of a problem, because it creates steam that you—and others in your home—may inhale. You can also absorb the chemical if you swim in a chlorinated pool. While we don't yet know the exact ramifications of showering in, bathing in, or swimming in pools containing chlorinated water, researchers suspect certain chemical byproducts of chlorine may boost the risk of cancer and reproductive problems like miscarriage.

If your water is chlorinated, you can probably smell and taste it. The easiest solution is to buy a showerhead filter; most use special KDF filters made of copper and zinc to remove chlorine. Carbon-based shower filters are also effective.

RUMOR *Fluorescent lights can give you cataracts.*

► **REALITY:** This myth is based on the fact that, like the sun's rays, fluorescent lights contain ultraviolet (UV) light, which can cause cataracts with long-term exposure. However, the glass in fluorescent light bulbs filters out UV rays before they hit your eyes. I'm more concerned that such unnatural lighting—it has a different spectrum from natural light—can contribute to fatigue, irritability, and hyperactivity, especially in schoolchildren. Fluorescent bulbs also flicker (too fast to be seen by the naked eye), which can trigger seizures in epileptics and migraines in susceptible people. And the buzzing noise they emit can be distracting. If possible, replace fluorescent lighting in your home with—or ask your employer to consider—healthier full-spectrum bulbs.

RUMOR *Jet aircraft exhaust trails are dispersing poisonous chemicals to intentionally harm us.*

► **REALITY:** Condensation trails, or contrails, form when jet aircraft exhaust—made of carbon dioxide and water—creates tiny ice crystals in the atmosphere. The results are the fluffy, white plumes you see in the sky on a sunny day. But some people believe that crisscrossing, web-like, or wispy, lingering contrails are a telltale sign of mysterious chemicals being sprayed in the air, which they call "chemtrails." They even claim that our government is spraying the unnamed chemicals in an attempt to sedate or kill off the elderly and infirm, and say they experience nausea, coughing, dizziness, forgetfulness, and other symptoms on the days they see "chemtrails." According to weather experts, so-called chemtrails are really just contrails that linger in the sky when the humidity is high. There's no reason to believe they contain toxic chemicals or that they cause major negative health effects, although contrails may gradually contribute to global warming. ☺

NUTRITION

Sweet Nothings

While food manufacturers view the development of high-fructose corn syrup (HFCS) as revolutionary, I consider it a crying shame. From soft drinks and energy bars to baby foods and salad dressings, HFCS is seemingly everywhere in the American food supply. And some health professionals, including me, feel it's doing more harm than good.

The product. First developed by Japanese scientists in the early '70s, this popular sweetener is made by converting cornstarch into a thick liquid. It's then treated with enzymes to create even more fructose, which makes it significantly sweeter. Although fructose is a sugar found naturally in fruits and some vegetables, HFCS contains highly concentrated fructose in amounts not found in nature. HFCS is cheaper to produce than refined (cane) sugar and less is needed because of its concentrated sweetness. It's also the darling of food manufacturers because its liquid form blends easily into beverages, it can extend a product's shelf life, and it prevents crystallization in frozen foods.

The problems. I feel that HFCS is a contributing factor to obesity since the public may be less conscious of calories from added sugars than those from dietary fat. As a cheap sweetener, it's allowed fast-food manufacturers to increase portion sizes (and therefore calories) without raising the price of, say, soft drinks, and these companies can still make sizeable profits. Whether it's pure coincidence or a direct correlation, the rise in use of HFCS over time has closely matched a similar increase in obesity rates.

I also wonder about the metabolic effects of such a steep increase in fructose consumption. Some researchers believe that fructose is broken down and absorbed differently in the body from other sugars, and may be more easily converted to fat by the liver. Early studies suggest that high levels of fructose may raise triglycerides (blood fats), increase insulin resistance, and boost blood glucose levels, factors that favor weight gain.

My bottom line. To my mind, HFCS is a low-quality sugar introduced by food manufacturers for their economic advantage. Its pervasiveness in the diet is symbolic of the way food has changed: We're moving away from whole, unrefined foods in favor of processed foods stripped of many nutrients, yet laden with calories. I'm especially disturbed by the amounts of HFCS consumed by children—in sodas, juice drinks, ice cream, and baked goods—and the potential created by these additional calories, when not offset by physical activity, for weight problems and type 2 diabetes.

For these reasons, I avoid foods with HFCS. And I'm conscious of other added sugars in my diet. Read labels to see whether HFCS is present and note its place on the ingredients list. ☺

Lifting the Stigma of Depression in Men

When I take a medical history, I try to ask not only about physical concerns but also about mental health in a nonjudgmental way. I might say, "Tell me about your moods." Unfortunately, many primary care physicians don't even broach the subject of psychological health, especially with their male patients. Doctors may not press the issue because they fear it might shame men—it's rare for a male patient to voluntarily admit any level of emotional pain. This "don't ask, don't tell" approach reflects long-held cultural beliefs and stereotypes about masculinity—that men are the "sturdy oaks" and "pillars of strength," who do not admit weakness or ask for help. In other words, men are suffering in silence when it comes to mental health.

Experts say that mental health problems in men are massively underdiagnosed. To address this problem, the National Institute of Mental Health launched its first national campaign last spring to raise awareness that depression is a major public health problem affecting at least 6 million American men every year (a statistic considered low since countless more don't even realize they're depressed and don't seek treatment). This educational effort, called "Real Men, Real Depression," is aimed at publicizing the fact that men might talk differently, or not at all, about the symptoms of depression. (For more information, visit <http://menanddepression.nimh.nih.gov> or

call 866-227-6464.) The observable symptoms of depression in men might look different from those in women; perhaps that's one reason why women are diagnosed with depression at twice the rate of men.

Recognizing Hidden Signs of Depression

If physicians and mental health professionals are looking for the same clues of depression as might be seen in a woman—like crying, sadness, helplessness, and guilt—then it's no surprise that they may fail to recognize the condition in men. When men become depressed, they might not express it in emotional terms but may instead experience it as physical complaints, such as sleep or sexual problems, headaches, or stomachaches. Compared to depressed women, who tend to discuss their difficulties with friends, depressed men may become more socially withdrawn. Or they may lash out at others, showing rage, anger, irritability, or frustration, even become physically abusive. Rather than acknowledging their feelings or seeking appropriate treatment for their psychological distress, some men deal with depression by throwing themselves into their work, turning to alcohol and other drugs, gambling, overspending, watching excessive amounts of television, having affairs, or taking dangerous physical risks. Through such behaviors, men may be attempting to moderate imbalances in brain chemistry and to hide their emotional pain from themselves, their families, and their friends.

Psychotherapist Terrence Real, author of *I Don't Want to Talk About It: Overcoming the Secret Legacy of Male Depression* (Scribner, 1998), says that when men show up at a therapist's office, it's often not necessarily to express their internal pain, but because of the defenses and behaviors they have been using to run away from it. For example, a man may seek out counseling for alcohol addiction rather than for the pain that underlies it. Real further goes on to differentiate two types of depression: He labels one *overt depression*, which is acute and usually obvious. Typical signs are difficulty making decisions, weight changes, exhaustion, forgetfulness, and visible sadness. Overt depression is more prevalent in women. It can make getting out of bed in the morning a struggle and interfere with functioning of all kinds. A second form, which he terms *covert depression*, is more elusive and chronic, and seemingly milder in its presentation. This "masked" form of depression is not consciously recognized by the person experiencing it and often remains hidden to others. Covert depression is more common in men and seems to flatten out—even deaden—emotions. Real points out that "if overt depression in men tends to be overlooked, covert depression has been rendered all but invisible."

While women are more often diagnosed with depression, it's perhaps equally true that the condition is more often underdiagnosed in men. But if the diagnosis and symptoms of depression were expanded to include some of the behaviors typically used by depressed men to help escape or cover

Shape Up Your Mind

Here are five tips that I recommend to help keep men mentally fit.

- **Get moving.** Regular physical activity is one of the best natural antidepressants available. Walk, swim, cycle, or play a sport at least five days a week to lift your spirits.
- **Make meaningful connections.** As a buffer against social isolation and loneliness, find people you can comfortably confide in. Have a heart-to-heart talk with a friend or family member. Pets can offer companionship as well.
- **Broaden your mind.** Develop interests outside of work—volunteering, cooking, politics—to expand your horizons and widen your social circle. Regularly practice a relaxation technique like breath work or meditation to stay centered and calm.
- **Try introspection.** Don't be afraid to look inward occasionally and make honest assessments of your level of satisfaction with your life, your work, and your relationships. Keeping a journal can also foster self-awareness.
- **Seek help.** Whether it's one-on-one with a therapist or within a men's group, you can find a safe place to better express your feelings. It takes practice. And it also takes courage for someone else to suggest that it might be worthwhile for you to pursue some form of therapy.

Grumpy Old Men

Getting older is not a risk factor for depression. Still, it's not unusual for elderly men to be diagnosed with depression, but, as in their younger male brethren, it too often goes undetected. Some mental health experts suspect that many cranky old codgers may actually be profoundly depressed.

While it's generally believed that suicide rates are highest among the young, the truth is that older white males have the highest rates. Furthermore, suicide rates for the elderly are highest among those who have more physical illnesses and are divorced or widowed. Older men might attach more of a stigma to depression and are often more reluctant to discuss any feelings of despair or hopelessness with their physicians or loved ones. But such stubborn attitudes—at any age—only delay seeking treatment for depression, which can save lives and make life more joyful once again.

up psychological pain—like addictions and antisocial behavior—the lifetime depression rates in men and women might be nearly equal. Depression affects men from all walks of life and every income bracket. It even occurs in men who seemingly have it all, such as football great Terry Bradshaw, gifted author William Styron, and TV newsman Mike Wallace, all of whom have openly shared their struggles with depression.

Contending with Stereotypes of Masculinity

Although brave men have certainly stepped forward and sought treatment for depression, many more simply deny the problem and pretend that everything is fine. Culturally, we expect men to be strong, to be in control, and to keep feelings to themselves. From a very early age, men have been taught to conceal their weaknesses, be independent, and not ask for help. Like other mental health conditions, depression is still cause for shame in our society. In addition, there's the mistaken belief that it's a female condition.

William Pollack, PhD, a clinical psychologist and director of the Center for Men at McLean Hospital in Belmont, Massachusetts, suggests in *Real Boys: Rescuing Our Sons from the Myths of Boyhood* (Owl Books, 1999) that boys learn how to hide behind a masculine mask and abide by the Boy Code. Society, Pollack suggests, trains boys to toughen up and cover up sadness and fear while appearing outwardly cheerful and resilient. Most boys become so skilled at wearing such masks that it's even harder to tell when they are experiencing emotional difficulty, both as children and, eventually, as men. According to Pollack, masculinity itself may be hazardous to males' physical and mental health because it places men in a gender straitjacket that constrains behaviors and denies pain. Parents and teachers often help to perpetuate these outdated assumptions and rules.

It doesn't have to be this way. Interestingly, research shows that infant boys are more emotionally expressive than baby girls—they cry, fuss, startle, and excite more. But by

elementary school, this emotionality in boys is damped down, and they have already learned to be ashamed of their feelings and to suppress their vulnerable, verbally expressive sides. Instead, they develop more "macho" ways to get their points across, such as getting angry or being noncommunicative.

In its most extreme form, hidden depression in men and a reluctance to admit it can result in suicide. While more women attempt suicide, men are generally more successful at it, probably because they use more lethal methods. But ultimately, whether you're male or female, the reasons for developing depression are likely the same: You've inherited a genetic vulnerability to the condition and have experienced some psychological stressor, such as loss or trauma, that could have altered your brain chemistry. Recent research has discovered a particular gene variant that may predispose individuals to depression (other gene variants protect people from it) when they're exposed to a stressful life event (*Science*, July 18, 2003). And a large study has found that it's not just loss itself, but humiliating blows to your self-esteem like being dumped by a romantic partner that may trigger depression in vulnerable people (*Archives of General Psychiatry*, August 11, 2003).

Restoring Wholeness: Treating Depression

In a previous article (November 2002), I described my integrative treatment recommendations for depression. These include lifestyle measures such as getting regular exercise and eating foods rich in omega-3 fatty acids, like salmon, sardines, ground flaxseed, and walnuts. These healthy fats are important components of cell membranes, particularly in the brain. I also discussed antidepressants (which I'm not opposed to for severe depression) and supplements like St. John's wort, an herb that's most effective for mild to moderate forms. And I touched on the merits of talk therapy, especially cognitive-behavioral therapy, which makes patients consciously aware of unhealthy thought patterns and reinforces how to adopt better emotional coping strategies. Taking antidepressants or herbal remedies is not a copout—or a complete solution—but they may help you feel better so you can address the psychological work that gets to the root of the problem.

Men may be fearful of and have inaccurate pictures of what it's like to talk with a therapist. These days, there are therapists who specialize in men's issues and offer male-oriented psychotherapy. Some mental health practitioners suggest that men view therapy more like coaching or consulting. In other words, you'll be seeing a professional, who has the skills to evaluate and then help you work on solving specific problems and finding results that work. Think of this individual as a personal trainer for your mind and relationships, who may teach you a vocabulary to identify and better express your emotions. By first dealing with the defensive behaviors a man might be using to mask an underlying emotional wound, therapy for depression can help men notice their emotions and stop feeling bad. It's a risk worth taking and talking about in order to start healing.

By the way, October 9, 2003, is National Depression Screening Day. At locations through the country, you can take a free depression questionnaire and get a referral to a mental health professional. To find a site near you, visit www.mentalhealthscreening.org or call (800) 520-6373. ☺

FAST FACT

Married men are about 6 percent less likely to die over a 7-year period than single men, according to a recent study.

Easy Bruising; Quorn; Tonsillitis; and More

I take 800 IU of vitamin E, 1,000 mg of omega-3s, and one aspirin daily. Could any or all contribute to easy bruising?

Both of the supplements you are taking as well as a daily aspirin can cause you to bruise easily, but of them, aspirin is the most powerful blood thinner. Frequent bruising may result from taking certain blood-thinning dietary supplements such as fish oil and vitamin E, as well as *Ginkgo biloba*, ginger, and garlic (dietary ginger and garlic are fine) and some medications, such as Coumadin and cortisone. If you're taking a full-dose aspirin every day for prevention, I suggest you first switch to a low-dose or "baby" aspirin to see whether this makes a difference, and if not, you might also need to experiment with reducing your dose of vitamin E and omega-3s.

Keep in mind that aging skin is more vulnerable to bruising because it's thinner and blood vessels are more fragile, plus years of sun exposure can also make skin more damage-prone. A tendency to bruise easily also seems to run in families, is

more noticeable on fair skin, and is more common in women, who naturally have thinner skin than men. Other reasons for frequent bruising may be diseases of the bone marrow or blood, liver disease, or a deficiency in vitamins C or K.

What's your opinion of Quorn products?

I have tried Quorn (pronounced *kworn*) foods several times and like them. Quorn is a new meat substitute found in the frozen health food section of your supermarket. It comes in various forms, from meatless "chicken" breasts and nuggets to a ground beef substitute and even lasagna. Many Quorn products are low in saturated fat and have no cholesterol.

There has been some controversy over the labeling of these meat alternatives. They are made from mycoprotein, which Quorn's manufacturer has described as "mushroom in origin." (Actually, Quorn is analogous to tempeh, the Indonesian staple food made by fermenting soybeans with an edible mold.)

HEALTHY LIVING

Showing Your True Colors

Color surrounds us in nature, inspires us in art, and may even offer clues to your health status. Ancient healing systems like traditional Chinese medicine (TCM) and ayurvedic medicine, which has roots in India, consider the color of different body parts and fluids during a physical exam. Practitioners may take into account the hue of a patient's complexion, tongue, and urine when making a diagnosis, a practice I find intriguing—and surprisingly accurate. For example, a red, rather than pink, tongue in TCM might mean toxicity or inflammation in the blood.

Conventional doctors are usually less color-conscious unless there's a serious, obvious problem like blood in your stool. I'm not surprised that people are often startled by sudden color changes in their urine, stool, or fingernails. After all, it can be disconcerting to discover that your urine is bright pink or a nail purple. But most causes of unusually colored urine, stool, and nails are harmless, and can be triggered by everything from the food you consume to the medications you take.

Here, I'll discuss the reasons for common color changes and tell you when they may be cause for concern.

Urine. Normally, urine is pale yellow, but certain foods, supplements, drugs, and diseases can affect its color, as can the amount of liquid you have consumed. For instance, red or pink urine can be caused by recently eaten beets or blackberries, or by taking the herbal laxative cascara sagrada or cholesterol-lowering statin drugs. If none of these apply, contact your doctor, since red or pink urine can be a sign of bleeding in the urinary tract. Likewise, black urine can have causes both mundane and serious: It can be triggered by taking iron supplements, cascara sagrada, and statin drugs, but can also signal internal bleeding and melanoma (skin cancer). And just one episode of cola-colored urine should send you to your physician, since it's a sign of liver obstruction (as in hepatitis). Other shades of urine are usually harmless, like bright yellow (from B-vitamin supplements), orange (from the drug Pyridium), and green or blue (from

artificial dyes). Keep in mind that dark yellow urine often means you're dehydrated and need to up your fluid intake.

Stool. Brown, well-formed stools are generally considered normal. Some foods can temporarily color your stool dark brown (red wine), green (green vegetables), or bright pink to red (beets), but if you haven't eaten or drunk these lately, check with your doctor to rule out any potential problems. Other causes for concern include black, tarry stools (which can signify bleeding in the upper GI tract), red stools (bleeding in the lower GI tract), and pale yellow or white stools (liver obstruction).

Nails. Ideally, your nails should be light pink. White spots or patches are often a result of an injury to your nail, as are black or purple nails. While other color changes can be serious, they are usually accompanied by other symptoms of disease. Pale white or colorless nails can indicate anemia; yellow can mean a fungal infection, the skin disease psoriasis, or overuse of nail polish; and blue can be a sign of respiratory problems, heart disease, lupus, or exposure to cold or high altitudes. Finally, a brown or black streak from the base to the tip of a nail can suggest melanoma; see your doctor for this one. ☼

The mycoprotein in Quorn is also derived from a mold (that's grown on grain), but from a marketing standpoint, describing it as a mushroom derivative sounds more appealing. The Center for Science in the Public Interest, a consumer food watchdog group, is concerned about mycoprotein's potential to cause allergic reactions since some people reportedly experience nausea, vomiting, or diarrhea after eating Quorn products. There is no proof that eating Quorn foods is the cause of these problems (and few people are bothered by tempeh).

I find Quorn products pleasant and flavorful, and think they are worth trying if you're looking for a new meat substitute. However, they are not suitable for vegans because they include egg whites.

Is applied kinesiology useful to diagnose health problems?

In my opinion, applied kinesiology isn't helpful in either diagnosing or treating health problems. Applied kinesiology practitioners typically diagnose and treat patients by testing their muscle resistance. They believe that certain muscles correspond to specific organs or glands and that weakness in a particular muscle can signal a problem elsewhere in the body. Correcting such a weakness will supposedly cure the corresponding health problem. In the so-called physical challenge, the practitioner presses against the muscles in a patient's arm or another limb, while the patient resists. A limb that does not resist well is considered weak. A chemical test may also be done, in which various nutrients are placed on the patient's tongue to test the reaction of the muscle. If the muscle seems to strengthen while the patient tastes the nutrient, she is said to be deficient in that nutrient. Once a full diagnosis is made, treatment may include nutritional advice, acupuncture, or chiropractic manipulation depending on the deficiency.

I'm not aware of any sound scientific evidence to support the claims made by applied kinesiology practitioners, and studies suggest it's no more accurate at diagnosing illness than random guessing. Physiologically, there's no reason to believe that an external evaluation of a muscle could pinpoint nutritional problems inside the body or that consuming a certain nutrient could immediately correct a severely weak muscle.

My 9-year-old son still wets his bed. What's your advice?

While most children begin to stay dry at night by age five or sooner, bedwetting can be a problem in kids up to 12 years old. A child who's unable to wake up when his bladder is full, has a small bladder capacity or above average urine production during sleep, or is experiencing stress is more likely to wet the bed. Occasionally, allergies or food intolerances to chocolate, dairy products, or citrus fruits may trigger bedwetting. Constipation may also contribute to the problem.

According to Sandy Newmark, MD, a Tucson, Arizona-based pediatrician and Program in Integrative Medicine graduate Fellow, the simplest and most successful solutions to bedwetting are behavior modification techniques, like a moisture alarm. Considered the most effective form of treatment, it uses a sensor attached to your child's pajamas to trigger an alarm (often worn on the wrist) at the first sign of wetness; this eventually conditions your child to wake up when his bladder is full. Dr. Newmark also suggests cutting back on

HEALTH IN THE NEWS

Goodbye Guggulipid?

A popular herbal remedy believed to lower cholesterol may actually raise it, according to a recent study. University of Pennsylvania researchers looked at 103 adults with high cholesterol who took guggulipid—a standardized extract derived from the resin of an Indian tree—or a placebo pill. After eight weeks, people who took either the typical daily dose of 3,000 mg of guggulipid or a higher dose of 6,000 mg a day had about a 5 percent increase in LDL ("bad") cholesterol. The supplement had no significant effect on total cholesterol, protective HDL cholesterol, or triglycerides. Although previous Indian research had suggested that guggulipid could lower cholesterol, this is the first well-designed Western study to test the herb. (*Journal of the American Medical Association*, August 13, 2003)

Comment: Although I once recommended guggulipid for high cholesterol, I've become less impressed with its results. I think red yeast rice products are better-researched and more effective natural supplements for reducing cholesterol. While the most studied red yeast rice supplement, Cholestin, is no longer available in this country (it is sold in Canada), similar products—combined with proper dietary and exercise measures—may be worth a try before turning to statin drugs. ☺

caffeine, decreasing fluids after dinner, and seeing a hypnotherapist. You might also visit a homeopathic practitioner, who may use remedies like *Causticum*, *Lycopodium*, and *Pulsatilla* to treat the problem.

Bedwetting isn't a learning disability, and you should never blame your child for it. Your son will eventually outgrow bedwetting, but if he experiences new or persistent daytime wetting, bowel difficulties, or urinary infections, this may signal a more severe problem, such as a kidney or bladder infection, and you should contact your pediatrician.

I have recurring tonsillitis. Is a tonsillectomy my best option, or are there natural measures I can try first?

Although self-care measures such as gargling with warm water mixed with hydrogen peroxide or salt can temporarily relieve the symptoms of this inflammation of the tonsils, there are no natural measures that I know of to cure it. Your tonsils—an organ behind your tongue containing lymphoid tissue—play an important role in protecting your body against infection, and doctors today are less eager to remove them unless absolutely necessary. But if your breathing is affected or the infection becomes recurrent, there is little else to do but have your tonsils removed. Surgery is now done on an outpatient basis, so you'll go home the same day although it can take up to two weeks to fully recover. During that time, I recommend sucking on ice cubes, drinking cold liquids, or eating ice cream or sherbet to relieve discomfort. ☺

FAST FACT

► Nearly 85 percent of physicians surveyed say they would like to learn more about complementary and alternative medicine.

13 Digestive Remedies

From one end of the digestive system to the other—a span of 30 feet—there are numerous opportunities for trouble. To help manage digestive difficulties, lifestyle measures like good eating habits, regular exercise, and relaxation techniques can make a difference. I've also found the herbal and other supplements described below to be worthwhile. All are available at health food stores or from online retailers. Try one remedy at a time to see what it does for you, then you can experiment with more than one if you wish. Follow package directions unless otherwise noted. Some ideas come from my colleague and friend Tieraona Low Dog, MD, a botanical-medicine expert in Albuquerque, New Mexico.

Artichoke leaf extract. Research suggests this extract can ease indigestion and irritable bowel syndrome (IBS), perhaps by increasing the flow of bile, a substance that helps digest fats. Look for extracts standardized for caffeoylquinic acids.

DGL. Deglycyrrhized licorice, also known as DGL, increases the mucous lining of the esophagus and stomach, protecting it from gastric acid. It's an effective remedy for heartburn, gastroesophageal reflux disease (GERD), ulcers, and gastritis. Slowly chew and swallow two DGL tablets before or between meals.

Digestive enzymes. Enzyme products can help people who have trouble digesting certain foods: Lactaid is an over-the-counter remedy for lactose (milk sugar) intolerance, and Beano (which helps break down sugars in beans, peas, and cruciferous vegetables) may reduce flatulence. Also, multi-enzyme formulas that help digest various nutrients may be useful for sluggish digestion, frequent indigestion, and IBS; one example is CompleteGest from Enzymatic Therapy.

Fish oil. The omega-3 fatty acids in fish oil appear to reduce inflammation in the intestinal lining, and research shows that fish-oil supplements help inflammatory bowel disease (IBD, which includes Crohn's disease and ulcerative colitis). I recommend a daily dose of 1,000 mg of EPA and DHA combined. One reliable fish-oil product is Ultimate Omega EPA Formula from Nordic Naturals.

Gentian. European herbalists use this bitter-tasting herb to stimulate digestion. Angostura aromatic bitters, a cocktail ingredient sold in liquor stores and supermarkets, is essentially a tincture of gentian root. For sluggish digestion, poor appetite, or flatulence, try taking a teaspoon of Angostura bitters in some sparkling water before or after meals. Because gentian increases stomach-acid secretion, I don't recommend it to people with ulcers or gastritis.

Ginger. Studies show that ginger works against motion sickness and morning sickness, although it's unclear how. To

prevent motion sickness, take 1,000 mg in capsule form one hour before travel, and an additional 500 mg every four hours as needed. Pregnant women can take up to 1,000 mg a day for motion or morning sickness.

Marshmallow root. This herb helps coat and soothe inflamed tissues, making it a useful remedy for various digestive complaints, including IBD, IBS, GERD, and heartburn. Marshmallow root comes in capsules or as a tincture, and it's also a component of Robert's Formula (see below).

Peppermint oil. Peppermint contains an oil that relaxes the smooth muscles of the digestive tract. Enteric-coated peppermint oil capsules have been shown to help IBS, and I also recommend them for diverticulitis. The enteric coating allows the capsules to pass through the stomach and dissolve in the lower intestinal tract, where you want them to work. Take one or two capsules three times a day between meals.

Probiotics. While foods such as yogurt and sauerkraut also contain "friendly" bacteria, probiotic supplements are much more concentrated. I recommend them to all people who take antibiotics, which also wipe out good bacteria. Probiotics can also help prevent traveler's diarrhea, improve sluggish digestion, and reduce excessive gas. And they can benefit IBD and IBS patients. Look for products containing *Lactobacillus* GG, like Culturelle.

Psyllium. Made from the dried seed husks of a variety of plantain, psyllium acts as both a laxative for constipation and prevents diarrhea by adding bulk to the stool, making it useful for general bowel maintenance as well as for those with IBS. Take psyllium with plenty of water so that it doesn't form an obstructive glob in the intestine.

Robert's Formula. Naturopathic physicians recommend this remedy—which includes marshmallow, slippery elm (see below), and other herbs—to treat IBD and IBS. Many products contain an extract of duodenal tissue (often from a sheep's intestine), but I use versions without this ingredient, such as Robert's Formula tincture from Gaia Herbs (800-757-9731) and GI Caps from Wise Woman Herbs (800-532-5219).

Slippery elm. This powder—made from the inner bark of the slippery elm tree—helps heal irritated tissues of the digestive tract. I've found it useful for treating diverticulitis, IBD, and IBS. Make it into a soothing gruel by mixing one teaspoon of the powder with one teaspoon of sugar, adding two cups of boiling water, and stirring well. Flavor with cinnamon if you like, and drink one or two cups twice a day.

Triphala. This ayurvedic mixture of three fruits helps regulate bowel function. Sold in capsule, tablet, or powder form, triphala is intended for regular use to tone the muscles in the large intestine, not to treat acute constipation. ☺

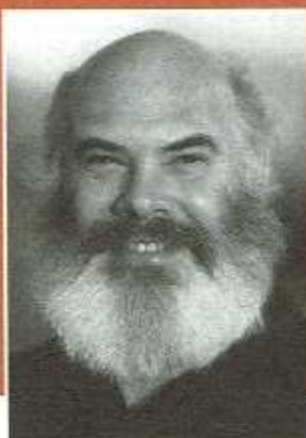
coming up

Coping with chronic fatigue • Advice for lung problems
• Light-box therapy • A cheese lover's guide • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing: Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:
www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.



Dr. Andrew Weil's

Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

November 2003

Dear Reader,

Not surprisingly, a recent study found that adults living in sprawling American counties weighed more—six pounds on average—and were more likely to be obese and have high blood pressure than urban dwellers. Varying levels of physical activity probably explain these differences: Urbanites walk more and drive less, and this presumably influences their health.

Perhaps when planning communities in the future, more consideration could be given to factors like easy access to sidewalks, bike paths, greenspace, and safe street crossings, which may promote walking, cycling, and social interactivity.

Sincerely,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

Living Well with Lung Disease	2
Images of Healing	3
Chronic Fatigue Syndrome	4
Ask Dr. Weil: Sarcopenia; Heating Olive Oil; and More	6
Health in the News	7
Should You Say Cheese?	8

Using Light as Therapy

In my winters at Harvard Medical School, I often woke up in darkness and came home past nightfall. Not seeing the light of day made me feel out of sorts. Lack of sun isn't a problem for me these days in Tucson, but it is for many people. Natural light has beneficial effects on both bodies and minds. During times when regular exposure to it is limited, light-box therapy provides an artificial source that simulates sunlight and may help treat health concerns ranging from depression to insomnia to eating disorders.

Light therapy (or phototherapy) involves the use of light boxes, ultraviolet (UV) light, or colored light. When using light boxes, patients sit at eye level with the light source for a prescribed amount of time each day. In UV light therapy, patients are exposed to bands of UVA or UVB light. And colored light therapy may direct beams of red, violet, or blue light on various parts of the body to stimulate healing. It has been around for a while, but it is not well studied. Below I'll illuminate some of the latest uses of light therapy.

Seasonal affective disorder (SAD). For some people in northern latitudes, the diminishing light of late autumn brings on this type of depression that lasts through early spring. Light-box therapy is the best-studied and now standard treatment for the fatigue, mood changes, and carbohydrate cravings associated with SAD, and I've found it to be effective. Daily exposure to high-intensity artificial light (10 to 20 times brighter than indoor lighting), typically in the morning at home, seems to work by resetting the body's internal clock, its circadian rhythms. It may reduce daytime levels of melatonin, the hormone that controls sleep and wake cycles, as well as increase brain chemicals that brighten mood. These days,

light boxes usually emit white light and filter out damaging UV rays. Patients are advised to keep their eyes open, but not look directly at the light. Light therapy may ease SAD symptoms faster than medication and has few side effects, but you may not be able to use it if your eyes or skin are especially sensitive to light.

Other therapeutic uses. Light boxes (which cost between \$200 and \$500) have only been in use since the '80s for SAD, so research is just beginning to shed light on their other potential health benefits. So far, most studies have been small and preliminary. Some early evidence has found that morning bright-light therapy may be a valuable nondrug treatment for pregnant women with depression, and Canadian researchers are studying its use for postpartum depression. It has also been successfully used to treat women with severe premenstrual syndrome, and in small studies has been shown to reduce bingeing and purging and improve mood in bulimics. Plus, light-box therapy seems promising as a treatment for non-seasonal depression (often when combined with antidepressant drugs), jet lag, and insomnia related to circadian rhythms. It's being investigated to ease sleep disturbances and agitation linked with dementia and may also improve sleep and alertness in night-shift workers. One good source of light boxes is Light for Health (www.lightforhealth.com; 800-468-1104).

UV light therapies. Unlike light-box therapy, UV light therapy is done with specialized equipment in a health facility, not as a form of self-care at home. This approach can help clear up psoriasis and other skin conditions or even jaundice in newborns. It may also help relieve symptoms in people with lupus, who are sensitive to sunlight but may benefit from exposure to a special light box emitting UVA light. ☼

Living Well with Lung Disease

Asthma isn't the only health concern that can leave you gasping for air. For people with emphysema, lung cancer, or other types of lung disease, struggling to breathe is an unfortunate—often frightening—way of life. In these conditions, the lungs are permanently damaged, weakened, or blocked. When it's hard to breathe, your body gets lower levels of oxygen than it needs, the brain and other organs struggle, and risk of death increases. Chronic lung disease is challenging, but several integrative approaches may help.

Think of the lungs as your body's cleaning crew. These pink, spongy organs recycle air by taking in oxygen and then removing carbon dioxide gas as waste when you exhale. Your lungs also protect against dust particles and other irritants that you inhale by using tiny hairs called cilia to sweep this material up to your throat, where you can cough it out.

In people with lung disease, the cilia and other parts of these organs are damaged—often by cigarette smoke and other

toxins—and the lungs don't function properly. Four common types of lung disease are chronic obstructive pulmonary disease (COPD, an umbrella term for emphysema and chronic bronchitis), lung cancer, pulmonary fibrosis, and sarcoidosis. In all of these disorders, airways in the lungs become blocked, inflamed, or otherwise damaged. The result is symptoms such as chronic cough, wheezing, shortness of breath, difficulty breathing, increased mucus production in the lungs, and, as can be the case with lung cancer, coughing up blood. Believed to be an autoimmune disease, sarcoidosis can also cause skin rashes, eye inflammation, and flu-like symptoms.

Although sarcoidosis often heals on its own, the other three lung diseases can gradually worsen and may deprive the brain of oxygen, leading to insomnia, headaches, and impaired thinking skills. Left untreated, they can be fatal, so I strongly suggest using conventional approaches, such as bronchodilators (oral or inhaled drugs that help open airways), corticosteroids, and other drugs that can help to ease symptoms. Also, people with severe lung disease often need supplemental oxygen, which can be carried with them in a tank. In some cases, a lung transplant may be the only hope of a cure.

Advice for Ex-Smokers

Congratulations! By quitting smoking, you've started on the path to better health and reduced your risk of lung cancer, COPD, and other lung diseases. But you may wonder what else you can do to protect your body from the damage already inflicted by tobacco smoke. I advise all former smokers to follow the measures described in the main article, which will help improve overall lung health, whether or not you've been diagnosed with lung disease.

As for supplements, it's best to eat a diet high in antioxidant-rich produce, although it's fine to take vitamins C and E and selenium as insurance. I advise against taking isolated beta-carotene supplements: High doses (33,000 IU or more per day) have been shown to *increase* the risk of lung cancer in smokers. While beta-carotene supplements have not yet been shown to increase lung cancer risk in former smokers, I still think you're better off getting this compound from foods like melon, squash, and carrots, since dietary beta-carotene is safe. If you supplement with mixed carotenes, I recommend choosing a product that contains no more than 20,000 IU of beta-carotene per day.

Help for Common Lung Problems

Here's my advice for treating the chronic lung diseases noted above. These approaches can be used along with conventional treatments, but tell your doctor if you take any of the supplements, since you may need a lower dose of medication.

Don't smoke. Smoking is the number-one cause of both COPD and lung cancer and can worsen other lung conditions. Quitting may slow the progression of these diseases and will likely help you start to breathe easier. (For advice on how to quit, see the December 2000 issue.) I'd also avoid secondhand smoke, which can exacerbate breathing problems.

Clear the air. Exposure to radon gas, asbestos fibers, and other toxins can trigger lung disease. Dust, chemical fumes, and other sources of indoor and outdoor air pollution can all increase your lungs' workload. Have your home tested for radon, keep your house clean, and use a high-efficiency particulate air (HEPA) filter to keep dust and other irritants to a minimum. If you live in a city or are otherwise regularly

Self Healing

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Cari Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERN: Heather McNally
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamwey
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. ■ Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. ■ This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING: 42 Pleasant St., Watertown MA 02472. Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 523-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

exposed to polluted air, I suggest taking New Chapter's Smokesheild, an herbal supplement (available in health food stores) that can help your body neutralize toxins from smoke.

Practice breath work. Even conventional doctors recognize the benefits of breath work for people with lung disease. That's because, when performed regularly, breathing exercises can strengthen your lungs, lower anxiety, and reduce the "air hunger," or breathlessness, that's common in lung conditions. Practice my Relaxing Breath (in which you inhale through your nose for a count of 4, hold for a count of 7, and exhale through your mouth for a count of 8) twice a day. If you find it hard to hold your breath while doing this exercise, just count at a pace that feels comfortable to you while still maintaining the 4:7:8 ratio. Your doctor may suggest additional breathing exercises, or you can check out my recording *Breathing: The Master Key to Self Healing* (call 888-337-9345 to order).

Keep moving. Exercise may seem scary if you're always short of breath, but inactivity can actually worsen lung disease. I recommend at least three days a week of aerobic activity (such as walking), working up to 30 minutes a day. Twice weekly sessions of strength training can also reduce fatigue and breathing difficulties. Consult your physician or physical therapist before beginning an exercise program, and start very gradually, by doing only 5 minutes of exercise at a time.

Eat well. Since many lung diseases involve inflammation in the airways, try to avoid foods that contain polyunsaturated vegetable oils, trans fats, and partially hydrogenated oils, all of which promote inflammation, and eat foods rich in omega-3 fatty acids (which have the opposite effect) like salmon, sardines, and flax meal. Also, antioxidants in food can nourish your lungs and reduce your risk of lung cancer, so aim to eat five to nine servings a day of produce, especially citrus fruits, apples, berries, leafy greens, squash, and tomatoes. Drink lots of good-quality water to thin the mucus that can clog airways, and sip a few daily cups of green tea, which has been linked with a lower risk of lung cancer.

Explore mind-body measures. Because stress can make breathing difficulties worse, I recommend practicing a relaxation technique every day. Options include breath work (see above), meditation, yoga, guided imagery, and self-hypnosis.

Take supplements. Two medicinal mushrooms show promise for people with lung disease: I typically advise anyone with chronic breathing problems to supplement daily with cordyceps, which research suggests may improve lung function. And people with lung cancer may want to take zhu ling, which has been shown to stimulate an immune response against lung tumors and increase the efficacy of chemotherapy and radiation. For both supplements, follow package directions and know that it may take up to two months of regular use to notice results. A reliable zhu ling product is made by the Eclectic Institute (800-332-4372); a good source for cordyceps is Fungi Perfecti (www.fungi.com; 800-780-9126).

Stay healthy. People with lung disease are more susceptible to respiratory viruses and complications from them. Follow immune-boosting measures like exercising regularly, eating a healthy diet, getting enough sleep, and washing your hands often. Consider daily supplementation with astragalus, a tonic herb I've found effective for warding off colds and flu. Plus, I recommend getting a yearly flu shot and the pneumococcal (pneumonia) vaccine every 5 years or so. ☺

FOCUS ON THERAPY

Images of Healing

If the many mind-body approaches, I find that guided imagery is one of the most creative, interesting, and empowering methods available today. It allows patients to harness the power of the mind and imagination to promote health and healing. I think there's no function of the body that's out of bounds for guided imagery—from chronic pain and autoimmune diseases to preparing for surgery and managing symptoms from cancer treatment. Sometimes I have to convince patients that this technique is real, that it works and is worth a try. So I've teamed up with Dr. Martin Rossman, a pioneer in this field, to create a new recording called *Self-Healing with Guided Imagery*. (To order, see the enclosed brochure or call 888-337-9345.) Here are five misconceptions about guided imagery.

FICTION *Imagery and visualization are the same thing.*

► **FACT:** People often confuse the two, but visualization refers to what you see in the mind's eye, while imagery involves some or all of your senses. Imagery involves thoughts in your mind that you can see, hear, taste, smell, or feel.

FICTION *Imagery is about seeing pictures in the mind.*

► **FACT:** The purpose of guided imagery is not about seeing pictures, but paying attention to what your body and mind are trying to tell you. If you get stuck on the idea of forming mental images, it limits your ability to use the power of the imagination. The word "guided" is important because somebody is helping you do this—usually a trained therapist or a recording.

FICTION *You must be a good visualizer to use imagery.*

► **FACT:** This is irrelevant. Guided imagery is not so much about learning to use the mind's eye as it is learning how to concentrate and focus your mind to try to stimulate your body's innate healing abilities.

FICTION *Dreaming is the most common form of imagery.*

► **FACT:** Worrying is more common. If you haven't learned to use your imagination positively, you may worry yourself sick or drive yourself crazy with fears or regrets—and it's all happening between your ears.

FICTION *Imagery is just wishful thinking.*

► **FACT:** Imagery is wishful thinking (or daydreaming) with a purpose: It can be useful to help you relax or set goals (like losing weight), and to help change your physiology. It can also help you learn about your inner world of feelings, thoughts, and body sensations. It's not exactly clear how imagery works, but I think the mind interacts with the body in ways more complex and creative than we can begin to specify. ☺

Coping with Chronic Fatigue Syndrome

Laura Hillenbrand's widely acclaimed book *Seabiscuit: An American Legend*, and the hit movie based on it, tell the true story of a half-blind jockey and undersized horse who become champions. But I think the author's own story may be just as inspiring. For 16 years, Hillenbrand has struggled with chronic fatigue syndrome (CFS), a complex and often debilitating illness whose hallmark is prolonged and overwhelming fatigue. Other common symptoms of CFS include impaired memory or concentration, muscle and joint pain, sleep disturbances, and vertigo (a sensation that the room is spinning around you). During the four years that Hillenbrand toiled on *Seabiscuit*, she was mostly homebound. When too tired to sit at her desk, she wrote in bed. When the vertigo got too bad, she wrote with her eyes closed.

Now a spokesperson for CFS, Hillenbrand is helping to give credibility to an illness whose sufferers are sometimes regarded as lazy, malingering, or depressed because they may not look sick. In recent years, the medical profession has come to accept CFS as a genuine illness, based on mounting evidence of neurological, hormonal (endocrine), and immune dysfunction in patients. To reflect this new thinking, a group of CFS experts and patients has recommended changing the disorder's name to "neuroendocrine-immune dysfunction syndrome."

The exact cause of CFS remains unknown, but my friend Anthony L. Komaroff, MD, a professor of medicine at Harvard Medical School and leading authority on CFS, says some plausible evidence indicates that the disorder may be triggered by a chronic, low-level infection with various viruses or bacteria. In a constant battle with these agents, the immune system becomes persistently overactive and produces an excess of inflammatory substances called cytokines. These may affect levels of neurotransmitters (brain chemicals) and hormones, resulting in numerous CFS symptoms.

Other factors that may play a role in the development of CFS include heredity (CFS may run in families), gender (the illness is far more common in women), physical trauma (like a car accident), stressful life events, and exposure to toxins. While depression is common in CFS patients, it seems to be a consequence of having the illness rather than a cause of it (depression isn't one of the symptoms that define CFS).

There is currently no laboratory test to identify CFS, so it's diagnosed by ruling out other possible causes of long-term fatigue, including anemia, hypothyroidism, lupus, Lyme disease, and multiple sclerosis. Drugs that may help with specific

symptoms of CFS include nonsteroidal anti-inflammatory drugs for pain and low doses of tricyclic antidepressants for sleep problems. The severity of this condition varies from patient to patient: While some are homebound or bedridden, others may be able to hold down a full-time job.

An Integrative Treatment Plan for CFS

I think it's important for CFS patients to know that you *can* get better. Symptoms are often worst near the onset of the illness, then tend to wax and wane. Many patients improve gradually over time, and some recover fully (this is more likely within the first few years of illness). So work with a physician or other primary-care practitioner who is optimistic, sympathetic, and experienced in treating CFS (for leads, try contacting a local CFS support group). And I urge you to pace yourself, balancing activity and rest, so that you don't push yourself too hard and then "crash" later.

I also advise patients to explore the following natural approaches. While none is a cure for CFS, some mix of these approaches may well help you to feel and function better within the limitations often imposed by the illness. Some ideas below come from Dr. Komaroff and David Kiefer, MD, a senior Fellow at the University of Arizona's Program in Integrative Medicine who has worked with CFS patients.

Exercise. While overexertion can worsen CFS symptoms, various studies show that gradually increasing aerobic activity can reduce fatigue and improve daily functioning and fitness in many CFS patients. Exercise may help by strengthening muscles and joints, improving sleep, and boosting mood. Choose a milder form of aerobic activity like walking, cycling, or swimming, and start slowly, with as little as three to five minutes of exercise a day. Then increase daily activity by no more than five minutes every two weeks. Over time, you may build up to 30 minutes a day, most days of the week.

In addition to aerobic activity, consider yoga, tai chi, or qigong. Some CFS patients report great benefits from these meditative forms of movement, which promote relaxation while increasing strength.

Cognitive-behavioral therapy. People with CFS often feel powerless over their symptoms, but cognitive-behavioral therapy (CBT) can help you regain a sense of personal control. Working with a therapist, patients learn to challenge negative beliefs (such as that you're a failure if you can't do

Statement of Ownership, Management, and Circulation

(Required by 39 USC 3685) 1. Publication Title: Dr. Andrew Weil's Self Healing. 2. Publication No.: 1085-0880. 3. Filing Date: 9/30/03. 4. Issue Frequency: Monthly. 5. No. of Issues Published Annually: 12. 6. Annual Subscription Price: \$29.00. 7. Mailing Address of Publication: 42 Pleasant St., Watertown, MA 02472. 9. Publisher: David H. Thorne, 42 Pleasant St., Watertown, MA 02472; Editor: Andrew Weil, MD, 42 Pleasant St., Watertown, MA 02472; Managing Editor: Cari Nierenberg, 42 Pleasant St., Watertown, MA 02472. 10. Owner: Thorne Communications, Inc., 42 Pleasant St., Watertown, MA 02472; David H. Thorne, Peter A. Thorne, Daniel Silver, 42 Pleasant St., Watertown, MA 02472. 15. Extent and Nature of Circulation

(Average No. Copies Each Issue During Preceding 12 Months/Actual No. Copies of Single Issue Published Nearest to Filing Date): A. Total No. of Copies (236,147/226,729). B. Paid and/or Requested Circulation: 1. Mail Subscriptions (233,299/223,819). 3. Sales Through Dealers and Carriers, Street Vendors, and Counter Sales (0/0). C. Total Paid and/or Requested Circulation (233,299/223,819). D. Free Distribution by Mail (0/0). E. Free Distribution Outside the Mail (780/809). F. Total Free Distribution (780/809). G. Total Distribution (234,078/224,628). H. Copies Not Distributed (2,069/2,101). I. Total (236,147/226,729). J. Percent Paid and/or Requested (99.67%/99.64%).

things you used to do) and to use effective coping strategies (such as how to budget your energy wisely). Several studies show that CBT can improve physical functioning and reduce fatigue in CFS patients. To find a practitioner, contact the National Association of Cognitive-Behavioral Therapists at www.nacbt.org or (800) 853-1135.

A healthy diet. Because inflammatory cytokines may play a significant role in CFS, dietary measures to reduce inflammation are a good idea, and they may also help with muscle and joint pain. Avoid polyunsaturated vegetable oils and trans fats, which promote inflammation, and include anti-inflammatory fats like olive oil and omega-3 fatty acids (found in salmon, sardines, freshly ground flax seeds, and walnuts). Because oxidative stress may also play a role in CFS, I advise eating plenty of antioxidant-rich fruits and vegetables. For insurance, consider supplementing with a daily antioxidant regimen (vitamins C and E, selenium, and mixed carotenes).

Also, I suggest limiting sugar and other high-glycemic-index carbohydrates (like white flour and white rice), which cause blood-sugar levels to rise rapidly but then plummet later, compounding fatigue. Eliminate caffeine, since its temporary energy boost is inevitably followed by a "letdown." And avoid alcohol, which can worsen symptoms of depression.

Some CFS patients report that food sensitivities worsen their symptoms. Common dietary culprits include wheat, dairy products, artificial sweeteners, and food additives such as MSG. If you suspect a particular food or ingredient might be linked to your symptoms, eliminate it for two weeks and then notice how your body responds when it's reintroduced.

Good sleep habits. Despite their exhaustion, many CFS patients have trouble falling asleep or staying asleep, and sleep disturbances can also contribute to fatigue and memory or concentration problems. Some experts believe CFS is linked to disturbed circadian rhythms (the body's internal clock), so sticking to a regular sleep schedule may help. If possible, go to bed and get up at the same time every day, and limit daytime napping. Also, use relaxation methods to help fall asleep.

Mind-body techniques. Research suggests that CFS is marked by altered levels of stress hormones, and it's clear that stress can exacerbate CFS symptoms. Try to keep stress levels in check by regularly practicing a relaxation technique such as breath work, meditation, guided imagery, or self-hypnosis.

Other alternative approaches. In my experience, both homeopathy and traditional Chinese medicine can benefit chronic conditions that are not well understood such as CFS. Dr. Kiefer suggests trying energy therapies, like Therapeutic Touch and Reiki, in which practitioners use their hands to transmit subtle forms of energy to the client. Such therapies may promote relaxation, ease pain, and boost vitality. And preliminary evidence suggests massage therapy can ease pain, boost mood, and improve sleep in CFS patients.

Support groups. By allowing CFS patients to share their experiences and coping strategies, support groups can be invaluable. Choose a group whose members have a positive attitude, and steer clear of groups that reinforce the notion that you can't get better. For a list of CFS support groups in your state, e-mail your name and mailing address to cfids@cfids.org, or send a self-addressed, stamped envelope with 55 cents postage to the CFIDS Association of America, Attn: Support Group Info, PO Box 220398, Charlotte NC 28222.

Supplements That Hold Promise

CFS patients may also wish to experiment with the supplements described below. Some (such as those that affect energy production on a cellular level) may result in general improvement, while others may help with specific symptoms. All are available at health food stores or from online retailers. I advise trying one remedy at a time to see if it helps (many of these products can take up to two months of regular use to provide benefits), then you can take more than one if you'd like.

Coenzyme Q10. This compound is involved in energy-production mechanisms in cells, and it's also an antioxidant. Plus, Dr. Komaroff says that some CFS patients with muscle pain and weakness swear by this supplement, although he points out that it hasn't been tested for this use in a scientific study. A reasonable dose is 100 mg per day, preferably in the form of easily absorbed softgels.

Essential fatty acids. In addition to getting omega-3s from food, you might consider taking fish-oil capsules; a typical daily dose is 1,000 mg of EPA and DHA combined. One reliable product is Ultimate Omega EPA Formula from Nordic Naturals. Also, there's some evidence that evening primrose oil (another source of essential fatty acids) may benefit CFS patients, but the evidence is mixed. If you try evening primrose oil, take one 500-mg capsule twice a day.

Herbal tonics. In Asia, several herbs are used as daily tonics to restore energy and boost stamina, including Asian and American ginseng, eleuthero (Siberian) ginseng, the ayurvedic herb ashwagandha, cordyceps and reishi mushrooms, and rhodiola (also called Arctic root). Another tonic herb that may be useful to CFS patients is astragalus, which has antiviral properties. Experiment with these herbs (take one or more) and see what they do for you. Tonics are safe to use indefinitely; follow package directions.

L-carnitine. This amino acid helps support energy production in cells. One small trial found that taking 1,000 mg of L-carnitine three times daily for eight weeks led to improvement in CFS symptoms. By the way, L-carnitine is expensive.

Magnesium. Another nutrient that affects cellular energy production, magnesium also helps muscles to relax. Some research suggests that supplementing with this mineral may improve CFS symptoms. The suggested dose is 200 mg of magnesium, three times a day, plus twice as much calcium to counter the mineral's laxative effects. Magnesium glycinate is well absorbed and may have less of a laxative effect.

NADH. Here's one more compound that's involved in energy production in cells. In a small study of CFS patients, 31 percent of those who took NADH (at a dose of 10 mg per day) reported a lessening of their symptoms after four weeks, compared to 8 percent of those who took a placebo (*Annals of Allergy, Asthma, and Immunology*, February 1999).

Zyflamend. For CFS patients with muscle or joint pain, Dr. Kiefer suggests New Chapter's Zyflamend—which contains ginger, turmeric, and other anti-inflammatory herbs—as an alternative to NSAIDs; follow package directions. ☺

To learn more: Contact the CFIDS Association of America at www.cfids.org or (800) 442-3437, and see *Chronic Fatigue Syndrome, Fibromyalgia, and Other Invisible Illnesses* by Katrina Berne, PhD (Hunter House, 2002).

Sarcopenia; Heating Olive Oil; and More

I'm 92 and exercise regularly (brisk walking and strength training) but was recently diagnosed with sarcopenia. What do you recommend for this condition?

Sarcopenia is a loss of muscle mass and strength that normally occurs with aging, and it's a major cause of frailty and disability in the elderly. I assume that your doctor has already checked to make sure there's not any underlying medical reason for your muscle loss and weakness besides simply getting older. If that's the case, it's important that you're getting enough protein in your diet to help preserve muscle. Older people need about 0.4 grams of protein daily per pound of body weight. If you weigh 120 pounds, you need roughly 50 grams of protein a day from your diet.

I think that you should continue to strength train and be physically active, which may slow the progression of muscle-related weakness and also help prevent falls or limited mobility. Make sure you're not lifting weights that are too light to challenge your muscles. Research has found that higher-intensity resistance workouts offer the most benefit to sarcopenia patients, so work your way up to using weights that are 80 percent of the maximum you can lift, two to three times a week. A personal trainer or fitness instructor can develop a strength-training program that meets your needs. In addition, be sure to get enough vitamin D, which is important for muscle and bone strength. I advise seniors to supplement with 800 IU a day in addition to getting this vitamin from their diet and exposure to sunlight.

My joints sometimes make popping and cracking sounds. Should I be concerned? Is it a sign of some deficiency?

It's unlikely that these noises are anything to worry about. Although their exact cause is still unclear, the popping and cracking sounds that can occur when you move your joints are normal and probably a result of the surrounding tendons snapping or tiny gas bubbles in the fluid around your joints popping. I'm not aware of any nutritional deficiency that could be responsible, but if the sounds are accompanied by pain, you should check with your physician, since it may be a sign of osteoarthritis or another joint disease.

What's your opinion of Bach flower remedies?

I think they're harmless and minimally effective. Named for Edward Bach, MD, the English physician who developed them in the 1930s, these flower remedies are based on the idea that negative moods and emotions can result in physical illness. Dr. Bach believed that unhealthy emotions could be treated with one or more of 38 highly diluted wildflower essences, which can be dropped on the tongue, rubbed into the skin, or added to water or juice and slowly sipped. For example, wild rose is said to alleviate apathy, while sweet chestnut treats mental anguish. A combination of five flower

essences called Rescue Remedy is sold as an "emergency" treatment for handling sudden stressful situations.

I'm not aware of any good studies to support Bach remedies or other brands of flower essences. That said, many people enjoy using them, and they appear free of side effects. I wouldn't rely on them indefinitely, however, since they don't get to the root of emotional problems and may delay therapy or other proven psychological approaches. (If you're a recovering alcoholic or otherwise wish to avoid alcohol, you may want to pass on Bach remedies, which contain diluted brandy.)

Is it true that heating olive oil at high temperatures turns it into a carcinogen?

Yes, heating *any* type of cooking oil at temperatures high enough to burn it (as can easily happen with frying) can increase the formation of polycyclic aromatic hydrocarbons (PAHs)—potentially carcinogenic chemicals. I'm very careful to use reasonable amounts of oil when frying and to keep the oil from burning, something which also ruins the oil's natural flavor. If you cook with hot oils, olive oil is a better choice than most since it has a high smoke point (about 400 degrees Fahrenheit, depending on the type). The smoke point of an oil is the temperature at which it begins to burn and potentially produce carcinogens. Refined olive oils have a higher smoke point than unrefined extra-virgin olive oil, and can withstand higher cooking temperatures before they begin to burn. For this reason, refined olive oils are better to fry with, though I like extra-virgin olive oil for other uses. But I personally prefer grapeseed oil, which has a much higher smoke point, for any sautéing without liquid in the pan.

I contracted Valley Fever 2 1/2 years ago, but I'm told I still have the fungus in my lungs. How can I clear this up?

So named because it was discovered in the San Joaquin Valley of California, Valley Fever is an infection caused by a fungus that lives in the soil in the southwestern United States, Mexico, and parts of Central and South America, and spreads when spores become air- or wind-borne and are inhaled into the lungs. (Its medical name is Coccidioidomycosis, or "Cocci" for short.) About 60 percent of those who breathe in the spores do not become sick, but others develop flu-like symptoms. Of these, a small percentage will have lingering fatigue, and rarely the spores can spread from the lungs to other places in the body such as the skin, bones, and, worst of all, the brain. The disease is now on the rise because more people are moving to the Southwest and more of them have weakened immune systems.

In your case, I might consider discussing with your doctor whether you may need to do another course of medication used to treat Valley Fever, such as the potent prescription antifungal Diflucan. Some patients need to take this medication for one month to one year or even longer, depending on

your body's ability to fight off infection. But keep in mind that drugs can only suppress, but not kill the fungus, perhaps one reason why it's still in your lungs and may need further treatment. In addition, I might try adding raw garlic to your diet. Eating one or two cloves a day, by chopping or mixing it into foods or swallowing small chunks whole like pills, may be beneficial because garlic has antifungal and antibiotic properties that may help treat Valley Fever. I would also recommend you take astragalus extract—a root used in Chinese medicine to help strengthen the immune system.

Is Penta water a healthier choice than regular water?

Penta is a brand of bottled water that's supposedly made up of smaller clusters of water molecules than ordinary water. Its manufacturer claims that these smaller clusters enter the body's cells faster than those of regular H₂O, hydrating and energizing you more quickly. Penta is popular with professional and college sports teams and celebrities and is sold by some chiropractors, doctors, and other health practitioners. Yet, there are few studies showing any real benefits for this trendy beverage. One small study found increased endurance in athletes who drank Penta water, and other research shows that fish submerged in Penta live longer than those swimming in tap water. But that's a long way from proving that Penta helps prevent and heal disease, as some proponents suggest. At more than \$2 per 16-ounce bottle, I'd save your money and drink good-quality filtered or distilled water instead.

You recently covered high blood pressure (March 2003), but what do you recommend for low blood pressure?

It depends on the cause. As a general rule, the lower your blood pressure is, the lower your risk of cardiovascular and kidney disease. But if blood pressure is *too* low (less than about 90 over 60), it can cause lightheadedness or fainting, particularly if you stand up suddenly from sitting or lying down. Low blood pressure, or hypotension, is far less common than high blood pressure and has many possible causes, including overly aggressive drug treatment for high blood pressure as well as dehydration, sodium loss through heavy sweating, prolonged bed rest, abnormal heart rhythms, and some neurological disorders. If you often feel dizzy after standing up or you have unusually low blood pressure readings, your doctor can help determine the underlying cause and proper treatment (such as adjusting the dose of antihypertensive medication). Also, don't stand up too quickly, and have a chair or other support nearby in case you feel dizzy.

Do you know of any natural remedies for a recurring case of ringworm?

Yes, some natural remedies may help. Ringworm looks like a ring on the skin, with raised red borders around a clear center. It's not caused by a worm, but rather a fungus. You can treat the condition with tea tree oil, a good antifungal agent. This clear liquid smells much like eucalyptus and can be found in most health food stores—make sure to use pure, 100 percent tea tree oil. Apply the oil directly on the affected area two to three times a day and continue to do so for at

This Just In . . .

Relaxation Boosts Seniors' Immunity

Relaxation methods can enhance immune function in older people, according to a pair of small studies. In one study, seniors took classes of tai chi—a gentle martial art—three times a week. After 15 weeks, they had a 50 percent increase in immune cells that specifically protect against shingles, a viral infection that causes painful blisters on the skin and is more common in older people (*Psychosomatic Medicine*, September 2003). The other study involved seniors serving as caregivers for spouses with dementia, a high-stress task that previous research has linked to greater vulnerability to illness. Caregivers who attended weekly stress-management classes for two months produced more antibodies in response to a flu shot (indicating enhanced protection) than caregivers who got the shot but didn't attend the classes (*Psychotherapy and Psychosomatics*, September/October 2003).

Comment: I think this research adds to a growing body of scientific evidence documenting the ability of the mind to affect the immune system. I put a great deal of emphasis on mind-body medicine, and think such approaches are interesting to learn, can be useful tools at any age, and clearly benefit physical health.

Magnets Less Attractive for Heel Pain

Magnetic shoe insoles may not be the answer for treating heel pain, suggests a recent study. Around 100 people diagnosed with plantar fasciitis, a common type of heel pain, wore cushioned insoles that either did or did not contain magnets. After eight weeks, more than 30 percent of participants reported feeling all or mostly better, regardless of which insole they used. Researchers concluded that the reduction in pain was due to the cushioned insoles only, not the magnets. (*Journal of the American Medical Association*, September 17, 2003)

Comment: In the past, I've suggested that people with plantar fasciitis experiment with magnetic insoles. However, studies like this one make me less likely to recommend magnets for people with foot pain. ☹

least 10 days after the skin clears up to ensure that the fungus has completely disappeared.

I suggest trying this natural remedy before using a prescription antifungal cream. Although the cream may get rid of the infection, tea tree oil is less toxic and has fewer side effects. If you're prone to recurrent fungal infections, you may also want to try adding one or two cloves of raw garlic a day to your diet—raw garlic has strong antifungal properties.

Finally, because ringworm is contagious, take steps to avoid spreading it to others and reinfecting yourself. Keep the area clean and dry. Don't let skin stay damp or wet for long periods of time, and avoid sharing items like hats, shoes, or bed sheets with others while you have the infection. ☹

Wondering if You Should Say Cheese?

I have a weakness for cheese. That might seem surprising, since I watch the amount of saturated (animal) fat I consume and I generally avoid cow's milk (its lactose content affects my digestion, but most cheeses have virtually no lactose). For years, I avoided cheese because I worried that it would raise my cholesterol and increase my cardiovascular risk. But with recent studies showing that moderate amounts of this calcium-rich food can be part of a heart-healthy diet, I've started to enjoy it again. We're a cheese-loving country: A recent survey shows that the average American now consumes some 30 pounds of cheese each year, nearly as much as the average European eats. Interestingly, what's been called "milk's leap at immortality" is set to surpass chocolate as this country's most craved comfort food.

Of course, the effect of cheese on your health largely depends on what kind you eat, how much of it, and how often you do so (30 pounds a year is a lot). Most people in this country eat low-quality cheese: processed products or mass-produced ones, very different from the natural cheeses with living cultures enjoyed in Europe. Here, I'll discuss some of my favorite—and least favorite—types of cheeses and their place in a healthy diet.

Cheeses made from cow's milk. Cheddar and mozzarella are this country's most popular cheeses—due mostly to their ubiquitous presence in cheeseburgers, pizza, and other fast-food fare. But there are many other natural cow's milk cheeses that you can enjoy sprinkled over food or as a small snack. Some of my favorites include Parmesan, Gruyère, French Munster, and Sbrinz (a type of hard Swiss cheese). I recommend avoiding very-high-fat varieties like Brie and triple cremes, and I'd definitely pass up processed cheeses. "Cheese food," such as Velveeta, American cheese, and Cheez Whiz spread, contains artificial dyes and preservatives, and is typically only about 50 percent real cheese.

Cheeses made from the milk of other animals. Milk from almost any animal—including goats, sheep, buffaloes, yaks, and even reindeer—can be made into cheese. In this country, you're most likely to see cheeses made from goat's and sheep's milk. I like goat's milk cheeses (also known as *chèvre*) that don't taste too goaty. You'll most commonly find sheep's milk cheeses in the form of Roquefort, a type of blue cheese, and feta, typically used in Greek dishes. Goat's and sheep's milk cheeses tend to be lower in fat and saturated fat than cow's milk cheeses. One ounce of goat's or sheep's milk cheese has 75 calories while most cow's milk cheeses contain about 105 calories, and they have a comparable amount of calcium.

Low-fat and nonfat cheese. The fat content of cheese contributes to its satisfying taste and texture. So it's not surprising that many people find low- and nonfat cheese lacks the flavor of higher-fat varieties, has a rubbery consistency, and doesn't melt well, despite compounds that have been added to it to counteract these problems. While this may be the case for some low- and nonfat cheeses, it's possible to enjoy healthier versions of other cheeses. Fresh cheeses that haven't been aged, like cottage cheese and cream cheese, come in tasty low-fat versions. Also, both Parmesan and Jarlsberg (Swiss) cheese are made from part-skim cow's milk and taste very good.

Cheese substitutes. Sold in natural food stores and some supermarkets, "cheeses" made from soy, rice, nuts, and other nondairy products are aimed mainly at vegetarians who eschew animal milk. Depending on their source, imitation cheeses have less fat and fewer calories than milk-based varieties, and many have added calcium to equal the content in regular cheese. But I've found these substitutes bear little resemblance to the real thing, both in flavor and meltability. Plus, many so-called vegetarian or vegan cheeses actually contain casein (a milk protein) as an additive, so you'll need to read labels if you wish to avoid animal products.

Enjoying Cheese without Guilt

It's possible to make cheese part of a healthy diet. Here are some tips for enjoying cheese without feeling guilty.

- **Eat moderate amounts.** I usually eat cheese every other day or so, but I keep my portion sizes to one or two ounces.
- **Read labels.** Cheese can be high in salt, so select cheeses with less than 300 mg of sodium per serving. With feta cheese, rinse off the salty brine it's packed in before eating.
- **Use it wisely.** I like to use cheese as a seasoning (freshly grated Parmesan sprinkled on vegetables, for example), combine it with a green salad for a healthy meal, or add a few pieces to a plate of fruit for an alternative to sweet desserts.
- **Stay safe.** Pregnant women should avoid soft cheeses like feta, goat, Brie, and blue cheese; these products can harbor dangerous *Listeria* bacteria that can affect fetuses. ☹

coming up

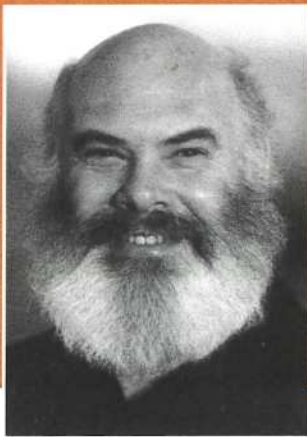
Women and heart disease • Stopping panic attacks
• Prostate cancer update • Chronic cough • And more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health, Natural Medicine*; *Spontaneous Healing*; *Eight Weeks to Optimum Health*; and *Eating Well for Optimum Health*.

another resource from Dr. Weil:

www.drweil.com

For customer service or to order subscriptions to Self Healing, please call (800) 523-3296.



Dr. Andrew Weil's Self Healing

CREATING NATURAL HEALTH FOR YOUR BODY AND MIND

www.drweilselfhealing.com

December 2003

Dear Reader,
Each December, we spend a good deal of time thinking about, shopping for, and wrapping up holiday gifts. But often, some of the best gifts we can offer won't be found at the mall, in a catalog, or online. As this month's cover story points out, the ability to forgive is truly a healing gift that you can offer yourself.

As for invaluable gifts you can give others, consider being more patient and understanding in the coming year. Or, perhaps try talking less, while listening and appreciating more. There's no shortage of possibilities.
Happy Holidays,

Contact *Self Healing* at 42 Pleasant St., Watertown MA 02472, or www.drweilselfhealing.com.

INSIDE

The Latest on Prostate Cancer	2
Inflammation Fighters	3
"Not Me": Women and Heart Disease	4
Ask Dr. Weil: Poor Circulation; Massage & Cancer; & More	6
Contending with Coughs	6
Health in the News	7
Halting Panic Attacks	8

The Gift of Forgiveness

As one year ends and another begins, you may wish to take stock of your mental health. Are you holding onto any anger and hurt from the past that's interfering with your emotional well-being? If so, perhaps one of the best gifts you can give yourself is the ability to forgive. Long a tenet of many religions, forgiveness is now being studied in scientific circles. And there's good evidence that it's a powerful healing agent for body, mind, and spirit.

I've noticed that people who are able to forgive say it lifts a psychic burden and offers a profound sense of relief and inner peace. While hurt and anger are normal responses to a painful event, they're meant to be short-term emotions and not long-term solutions. In addition, I think that forgiveness helps to remove some emotional obstacles to health and healing. When you decide to forgive, you're letting go of bitterness, blame, and resentment, while staying stuck in these negative emotions may compromise immune function and increase your risk for health problems.

Research shows the physical and emotional benefits of forgiveness. People who are taught to forgive feel less angry, depressed, anxious, and stressed, and they become more happy and self-confident. In one study, grudge holders who relived in their minds a hurtful experience and imagined forgiving had significantly lower blood pressure and heart rates than when they pictured an unresolved grievance.

Personality, temperament, and family history may help explain why some people find it easier to forgive than others. There are even some age and gender differences. When trying to find research volunteers, more women responded to a recruitment ad that used the word "forgiveness" while men preferred the

term "grudge." And younger adults (ages 18 to 44) report that they're less likely to forgive than middle-aged or older adults.

Tips on Burying the Hatchet

While forgiveness often needs time, thought, distance, and effort, I also believe it's a skill you can learn. Some guidance:

You don't need to forget. Forgiveness doesn't necessarily mean forgetting the hurt, the injury, or the injustice. Yet, it does mean changing your relationship to the bitterness so there can be some acceptance and moving on rather than remaining attached to the pain. You still hold people responsible for their actions, but you release the bad feelings and their power to hurt you. You may not need to confront the offender, and it can be purely inner work.

You're the main beneficiary. Forgiveness is a way to heal yourself rather than the people who hurt you. It means accepting that you can't change the past, but recognizing you can suffer less and find peace of mind.

Take it step-by-step. Self-help books such as *Forgive for Good* by Fred Luskin, PhD (HarperSanFrancisco, 2002), suggest ways to forgive. They may entail acknowledging the hurt and talking it out with a sympathetic listener, either a mental health professional or close friend. Another step is to empathize with the offender and consider what it would feel like to be forgiven. You may then reflect on your own faults and failings, and complete the process by forgiving yourself.

Forgiveness has its limits. In certain instances, forgiveness is difficult and may not be appropriate, say, for a heinous crime. But you can still work on managing the impact of anger and resentment within yourself. ☯

The Latest News about Prostate Cancer

What do actor Robert De Niro, presidential contender John Kerry, and TV evangelist Pat Robertson have in common? During 2003, all revealed they had been diagnosed with prostate cancer. In the United States, a man's risk of developing prostate cancer during his lifetime is about 30 percent, although only 3 percent of all men die from this disease. Below, I'll discuss the latest studies on prostate cancer, and what these findings mean for men.

PSA tests miss most tumors. The prostate-specific antigen (PSA) test, widely used to screen for prostate cancer, does not identify the majority of tumors, according to recent research. The study, reported in the *New England Journal of Medicine* (July 24, 2003), evaluated some 6,700 men age 50 and older. All the men underwent a PSA blood test, which measures levels of a protein produced by the prostate; high levels may indicate cancer. The test missed 82 percent of cancers in men younger than 60, and 65 percent of cancers in older men. Researchers recommended lowering the threshold for a "healthy" PSA reading from 4.1 to 2.6, particularly for younger men, to possibly catch more tumors in their earliest stages. But such a change would also cause more men who don't have prostate cancer to undergo unnecessary biopsies.

My advice: I don't advocate routine PSA testing unless you're at high risk for prostate cancer: African-American men and men with a personal or family history of prostate cancer should be screened annually starting at age 40 or 45. For other men above 50, I advise talking with your doctor about the benefits and risks of PSA testing so you can make an informed decision. Be aware that prostate cancer is often slow-growing, particularly in older men, and that aggressive treatment can have significant side effects, including urinary incontinence and erectile dysfunction.

A drug to prevent prostate cancer? A large clinical trial has found that Proscar, a prescription drug that's used to treat prostate enlargement, can also reduce the risk of prostate cancer, but there are drawbacks. The study, reported in the *New England Journal of Medicine* (July 17, 2003), looked at nearly 19,000 men age 55 and older who received daily doses of Proscar or a placebo for seven years. Those who took the drug were 25 percent less likely to develop prostate cancer. But men who developed prostate cancer while taking Proscar

were *more* likely to have high-grade (aggressive) tumors. And men taking the drug were also more likely to have sexual side effects such as erectile dysfunction and loss of libido.

My advice: Based on this study, I would not recommend taking Proscar in hopes of warding off prostate cancer. It's unclear whether the drug's possible benefits outweigh its risks, but we do know that dietary and other lifestyle measures to prevent prostate cancer (see page 3) pose no such risks. By the way, research shows that the herb saw palmetto is just as effective as Proscar in treating prostate enlargement, with far fewer side effects, but I've seen no evidence that saw palmetto can reduce the risk of prostate cancer.

Too much zinc may increase risk. Although a previous study suggested zinc supplements may help protect against prostate cancer, a recent study shows that men who take very high levels of the mineral are at greater risk of malignancy. The study, reported in the *Journal of the National Cancer Institute* (July 2, 2003), tracked some 47,000 male health professionals. Those who supplemented with up to 100 mg of zinc per day showed no increased risk of prostate cancer. Yet, men who took more than 100 mg of zinc per day were more than twice as likely to develop advanced prostate cancer compared to those who didn't take zinc supplements. (The Daily Value for zinc is 15 mg.) Zinc obtained from food was not associated with prostate cancer risk. It's unclear how excessive zinc may promote prostate cancer, although taking more than 100 mg a day may impair immunity.

My advice: I think it's fine for men to take 15 to 30 mg of zinc a day. Because long-term use of zinc may inhibit copper absorption, also take 1 to 2 mg of copper a day. (Many multivitamins contain zinc and copper at these dosages). Vegetarians may wish to take 30 mg daily, since they often get less of this mineral than meat eaters. Plant-based sources include wheat germ, legumes, and whole grains. Also, taking 30 mg of zinc a day may reduce the symptoms of an enlarged prostate.

Masturbation may be protective. Frequent masturbation, especially in young adulthood, may lower a man's risk of prostate cancer, according to a recent study by Australian scientists. The study, reported in *BJU International* (August 2003), examined the sexual habits of more than 2,300 men, about half of whom had been diagnosed with prostate cancer.

EDITOR: Andrew Weil, MD
PUBLISHER: David Thorne
EDITORIAL DIRECTOR: Cari Nierenberg
EXECUTIVE EDITOR: Dan Fields
RESEARCH EDITOR: Jessica Cerretani
EDITORIAL INTERN: Heather McNally
MEDICAL ADVISOR: Russell H. Greenfield, MD
DESIGNER: Mary Lynch
CIRCULATION DIRECTOR: Shirley Barry
FULFILLMENT MANAGER: Devin McCloskey
CUST. SERVICE COORDINATOR: Barbara Hamwey
PRODUCTION MANAGER: Mandy Stone
TREASURER: Janet A. Carlson

Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Thorne Communications, Inc., 42 Pleasant St., Watertown MA 02472; (617) 926-0200. ■ Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306-8162. Periodicals Postage paid at Boston MA and additional mailing offices. Copyright 2003, Thorne Communications. All rights reserved. Photocopying or reproduction without written permission from the publisher is strictly prohibited. ■ This newsletter is not intended to be a total replacement for standard (allopathic) medicine, which has its place in the diagnosis and treatment of disease. Any unusual, persistent, or severe symptoms should be evaluated by a physician. The natural treatments suggested here can affect different people differently, occasionally producing adverse reactions. If a condition fails to respond to these treatments, you should consult a physician to see about another course of action. PRINTED IN THE U.S.A.

WRITING TO SELF HEALING:
42 Pleasant St., Watertown MA 02472.
Dr. Weil and his staff cannot respond personally to letters, but will answer selected health questions in *Self Healing*.
WEBSITE: www.drweilselfhealing.com
CUSTOMER SERVICE: (800) 523-3296
ADDRESS CHANGES: Send these to us at PO Box 2062, Marion OH 43306-8162.
SUBSCRIPTIONS: US \$29/yr; Canada \$36
BACK ISSUES: \$4.95 each; to order, call (888) 3DR-WEIL, or write to us at PO Box 2062, Marion OH 43306-8162.

NUTRITION

Inflammation Fighters

We've all experienced inflammation—from sunburn to infections. By sending more blood and immune activity to an injured or infected area, inflammation is protective and helps you heal. But when inflammation is prolonged or misplaced in the body, it's not a beneficial process. An emerging theory in medicine today is that chronic inflammation may underlie such problems as coronary heart disease, Alzheimer's disease, and possibly even cancer.

I believe the foods you eat can influence inflammation, especially your choice of fats. Your body produces prostaglandins—hormones that help regulate inflammation—from fatty acids. Most Americans are eating a pro-inflammatory diet that doesn't provide enough omega-3 fatty acids, which prevent or slow down inflammation, and contains too many omega-6 fatty acids, which can increase inflammation as well as promote cell proliferation and blood clotting. I often recommend an anti-inflammatory diet designed to limit omega-6 fatty acids and boost omega-3s. Since inflammation may be the basis for many age-related diseases, I think that eating this way is a good idea not only for those who have or are at risk for the conditions noted above, but for anyone wanting to enjoy healthy aging.

Increase your omega-3s. Unlike beef and poultry, fatty fish like salmon (wild salmon has more omega-3s than farmed), herring, and sardines can give you these beneficial fatty acids, along with protein. Try to eat at least two to three 3-ounce servings of fish a week. Plant sources of omega-3s include freshly ground flax seeds (sprinkle them over salads, cereals, or baked potatoes for a nutty flavor), walnuts, walnut oil, and hemp seeds. Soybeans and sea vegetables (like nori and arame) have smaller amounts. Another source is fortified eggs from chickens fed dietary supplements containing omega-3s.

Eliminate the wrong fats. Polyunsaturated vegetable oils, like safflower, sunflower, corn, and sesame oil, are rich in omega-6 fatty acids, which favor inflammation, as do the trans fats in margarine, vegetable shortening, and partially hydrogenated oils. Avoid them and foods made from them.

Use olive oil as your main cooking oil. Although it's expensive, I prefer to use extra-virgin olive oil as my principal dietary fat. This flavorful oil is a healthier option than polyunsaturated vegetable oils, which are rich in omega-6 fatty acids.

Eat more fruits and vegetables. Berries, cherries, and dark leafy greens (lightly cooked) are especially good sources of antioxidants, which neutralize the free radicals that may cause inflammation.

Season with healing spices. Using turmeric, red pepper, and ginger can add flavor to your meals and contribute natural anti-inflammatory compounds. ●

Men who reported ejaculating more frequently—with or without sexual intercourse—between the ages of 20 and 50 were less likely to develop prostate cancer. Also, men who ejaculated more than five times per week in their 20s were one-third less likely to develop aggressive prostate cancer later in life. Researchers suspect frequent ejaculation may prevent carcinogens from building up in the prostate gland.

My advice: Masturbation is a normal expression of sexuality, and it's harmless unless you masturbate compulsively or cause yourself physical irritation. If this study's findings are confirmed, they should become part of the advice that doctors give men for protecting their reproductive systems.

Reducing Your Risk: The Power of Your Plate

An estimated 75 percent of all prostate cancers could be prevented by lifestyle changes. I believe dietary measures are particularly important as protective strategies. For instance, diets high in saturated fat have been linked to a higher risk of prostate cancer, offering one more reason for men to limit their intake of red meat and full-fat dairy products. But regular consumption of the following foods can lower your risk.

- **Fruits and vegetables.** Men who regularly eat tomatoes, tomato products, or cruciferous vegetables (like broccoli, kale, and cabbage) are less likely to develop prostate cancer. The carotenoid lycopene is believed to be the protective compound in tomatoes; other food sources of lycopene include watermelon and pink grapefruit. Crucifers are rich in phytochemicals that may protect against cancer. And produce in general is a good source of fiber, which may reduce prostate cancer risk by helping to eliminate excess hormones from the body.

- **Soy foods.** Whole soy foods like tofu, soy milk, and tempeh contain isoflavones, plant estrogens that appear to help protect against both prostate cancer and breast cancer. Soy supplements may not offer the same benefits as soy foods.

- **Fish.** Men who eat fish a few times a week have a lower risk of prostate cancer. The omega-3 fatty acids in fish (like salmon and sardines) may suppress the growth of tumor cells.

- **Ground flax seeds.** Flax meal is rich in omega-3s as well as lignans, phytoestrogens thought to help protect against prostate, breast, and colon cancers. However, men should probably avoid supplementing with flaxseed oil: Lab studies suggest it may increase the growth of prostate cancer cells.

- **Garlic, onions, and scallions.** Research in China shows that men who eat more foods in the pungent allium family are less likely to develop prostate cancer.

- **Green tea.** This beverage contains antioxidant compounds called polyphenols, which have been shown in lab tests to block the development of prostate cancer.

Here are more ways to reduce your risk of prostate cancer: Maintain a healthy weight. Get regular aerobic exercise. Take daily supplements of vitamin D (400 to 800 IU), vitamin E (400 to 800 IU of mixed natural tocopherols or 80 mg of mixed tocopherols and tocotrienols), and selenium (200 mcg). Don't smoke, and keep alcohol intake moderate.

Plus, some research suggests a high intake of calcium may increase prostate cancer risk, so men may want to get no more than the daily recommended intake of calcium (about 1,000 to 1,200 mg), preferably from food. Men who supplement with calcium shouldn't take more than 1,000 mg a day. ●

“Not Me”: Women and Heart Disease

Men and women may not always agree on matters of the heart, but our hearts themselves are actually quite alike. Although the size of a woman's heart is proportionally smaller than a man's, the heart is the most important muscle in the body, whether male or female.

But there are gender differences around heart health. Men have been conditioned for years to believe that they are at risk for heart attacks. Yet, most women view breast cancer as their greatest health threat, even though heart disease kills far more women each year than any other condition—including *all* types of cancer combined. This “man's disease” may even have more debilitating consequences for women, because they are more apt to die or be disabled after a heart attack. That is a shame, since heart disease is largely preventable. Here—along with Katharine Bursleson, MD, a cardiologist and senior Fellow at the University of Arizona's Program in Integrative Medicine—I'll explore some of the main reasons why every woman should be more concerned about heart disease.

Seven Heart-Breaking Facts for Women

While men's risk of dying from heart attacks has declined in recent years, women's risk has increased. I think that's partly because women don't believe they're vulnerable to heart disease, so they might not take risk factors like high cholesterol, obesity, and diabetes as seriously as a man might. Add the fact that women tend to be older and have other illnesses by the time they're at highest risk, and you've got what's been termed a “silent epidemic.”

Below I'll discuss some truths about women and cardiac disease that, if ignored, may truly break your heart.

1 Heart disease is your number-one killer. Some 60 percent of women surveyed incorrectly believe their risk of breast cancer is higher than their chance of developing heart disease. That may have to do partly with the fact that public education campaigns for heart disease over the past 20 years have been aimed primarily at men, while campaigns directed at women have mainly emphasized breast cancer risks. In truth, women are at least six times more likely to die of heart disease than breast cancer.

The National Heart, Lung, and Blood Institute recently began a national awareness campaign called “The Heart Truth,” which includes a red lapel pin in the shape of a dress. I'm hopeful that this will help educate more women about heart disease risk, much as the “Pink Ribbon” campaign has helped raise awareness of breast cancer. (Visit www.nhlbi.nih.gov/health/hearttruth/ for more information.)

2 Your symptoms may be different. Think heart attack and you probably imagine a middle-aged man clutching his chest and falling to the floor. But when a woman suffers a heart attack, it isn't always something out of the movies: Women's heart attack symptoms—like nausea, shortness of

breath, fatigue, and jaw, shoulder, or back pain—tend to be far less dramatic than men's, although researchers aren't sure why. Because such symptoms are nonspecific, a woman is likely to think she's suffering from indigestion or stress, especially if she doesn't believe she's vulnerable to heart disease. But failing to seek help can also delay your care to such an extent that normally effective treatments like blood-thinning drugs may be of little use. My bottom line: If you have any of the major risk factors mentioned here, pay special attention to *any* unusual symptoms. When in doubt, call 911.

3 You're older (and possibly sicker) when heart disease strikes. Women usually develop heart disease after age 60, about 10 years later in life than men. Although the reasons for this difference are still not known, researchers suspect that estrogen may protect a woman's heart against damage during her first six decades. After menopause, estrogen levels—and the protection afforded by them—decrease until a woman has the same risk of heart problems as a man. But by then, she may be more concerned about preventing diseases like cancer, osteoporosis, and arthritis to pay much attention to her heart.

Being older, frailer, and having additional illnesses like diabetes means that women are less likely than men to be treated aggressively once heart disease is detected. Fewer women than men take aspirin therapy or get clot-busting drugs, bypass surgery, or balloon angioplasty, since the potential health dangers of these approaches tend to outweigh the benefits in sicker, older patients. That's also one reason why only about a quarter of subjects in heart-related research studies are women.

4 You're more likely to die or be disabled after a heart attack. Because women are typically older when they develop heart disease and may also have other diseases like diabetes and high blood pressure, they may not heal as quickly from a heart attack—if they even survive one. In fact, female heart patients often end up permanently debilitated and disabled. While medication may help ease symptoms, the damage to the heart can't be reversed. In fact, two-thirds of women fail to make a full recovery after a heart attack.

If you do suffer a heart attack, I strongly advise joining a cardiac rehabilitation program (your doctor can refer you to one). Such programs, which teach you healthy new ways of eating, exercising, and living, can help prevent further heart attacks. Yet, fewer women than men attend cardiac rehab, even though those who do have a lower risk of having another heart attack. One reason why: Women are older when they attend rehab and may lack the social support to encourage their participation. Men are often driven and accompanied by their wives, while older women tend to be widowed and lack transportation. If this is the case with you, I urge you to reach out to and ask for help from family members, friends, your church, or other social connections.

Testing, Testing...

Doctors have long used treadmill stress tests to detect abnormal heartbeats that can signal heart disease in men. But these tests can show a lot of false-positive results in women *without* heart problems, making them a less effective indicator of women's heart risk. However, a recent study suggests that stress tests may indeed help determine risk in women, if doctors pay more attention to two aspects of the test. According to the study, both a woman's fitness level and the time it takes her heart rate to return to normal after a treadmill exercise stress test can best help predict her risk of heart disease (*Journal of the American Medical Association*, September 24, 2003). Researchers found that women who tired most quickly while working out were nearly 3.5 times more likely to die from heart disease than those who could keep up with moderate physical activity—about the equivalent of walking a 15-minute mile. Take this study to heart by getting regular exercise, like brisk walking, fast dancing, or yard work, at least 30 minutes a day, most days of the week.

5 HRT isn't an option. Researchers long assumed that taking supplemental estrogen in the form of hormone replacement therapy (HRT) would protect against heart disease the same way a woman's natural levels of estrogen shield her before menopause. But the large Women's Health Initiative study shocked many doctors and patients last year when it found that supplemental estrogen and progestin actually *increased* a woman's risk of heart disease by more than 80 percent in the first year of use alone. We now know that HRT is no magic pill, and you shouldn't rely on it to either protect against heart disease or prevent a second heart attack.

6 Certain "female" traits can put you at risk. Anger, hostility, and other "type A" emotions have been shown to raise heart disease risk. But research suggests women are more sensitive than men to stress caused specifically by family and work issues, and they're more likely to experience physical and emotional reactions to these stressors. It's not clear why, but taking care of others (even healthy family members) also makes a woman more prone to heart disease.

Even housework may raise risk: In one study, researchers found that, after recovering from a heart attack, women are more likely to tackle heart-taxing household chores. Experts suspect that's because women tend to view housework as part of their traditional role and may feel they need to resume it to maintain their identity.

While relaxation techniques can help reduce stress, such studies suggest that women may also need to learn new ways of expressing their needs (by asking for help around the house, for example). I recommend practicing breath work, meditation, or yoga daily, and considering talk therapy if you need help better coping with life's stresses.

7 Some risk factors affect you differently. Even though women have the same modifiable risk factors for heart disease as men—like high cholesterol, high blood pressure, diabetes, smoking, obesity, and inactivity—I advise paying special attention to two preventable risks that may affect you

differently. Although it's unclear why, diabetes appears to elevate a woman's odds of both developing and dying from heart disease more so than it does a man's. If you're diabetic, get the condition under control, and if you're at risk for diabetes, start taking steps now to prevent it.

In addition, when it comes to elevated lipids, women's heart risk may be more related to HDL ("good") cholesterol levels that are too low than to LDL ("bad") cholesterol levels that are too high. You'll need to make sure HDL remains high (more than 60 mg/dL). Plus, women may be more sensitive to high levels of triglycerides, unhealthy blood fats that can raise heart risk. (For more on controlling cholesterol, see the December 2002 issue.)

Prevention: The Heart of the Matter

Experts believe that the majority of heart attacks could be prevented if women followed lifestyle measures known to reduce risk. Quitting smoking can improve your heart health, no matter how many risk factors you have. Here are some other measures that can help.

Maintain a healthy weight. Overweight women are more likely to develop heart disease even if they have no other risk factors. That's because extra pounds—especially around your waist—strain your heart and increase your chances of developing high cholesterol, high blood pressure, and diabetes. Losing just 5 to 10 percent of your current weight can help lower your risk of heart disease.

Move it. A sedentary lifestyle is the most common risk factor for heart disease in women. Being physically active helps to decrease LDL and raise HDL cholesterol, lowers blood pressure, reduces your risk of diabetes, keeps blood vessels flexible, helps shed pounds, and eases stress—all great ways to protect your heart.

Eat well. A heart-healthy diet is one that's low in saturated and trans fats, processed foods, and animal products and high in monounsaturated fats, omega-3 fatty acids, whole grains, fruits, and vegetables. I also recommend that you avoid high-glycemic-index foods like white rice, flour, and pasta, which can spike blood sugar levels, increasing your risk of developing diabetes.

Take health problems to heart. Don't assume that if you are free of traditional risk factors your heart is safe: Women with borderline-high cholesterol, blood pressure, or blood sugar levels are at higher risk for heart disease, too, and need to control these conditions. 🌱

To learn more, see *Women Are Not Small Men* by Nieca Goldberg, MD (Ballantine, 2002). Another good resource is *The Healthy Heart Handbook for Women*, a booklet from the National Heart, Lung, and Blood Institute; read it for free at www.nhlbi.nih.gov/health/pubs/pub_gen.htm or call (301) 592-8573 to order for \$4.

Hot off the presses—Our 2003 Annual Edition
Buy your copy today. **Call (888) 3DR-WEIL.**

Poor Circulation; Massage and Cancer; and More

What can I do for poor circulation in my feet?

First, I suggest seeing your doctor to evaluate whether there's an underlying medical reason for your poor circulation.

Blood flow to your feet may be restricted by atherosclerosis or diabetes, for example, conditions that can weaken or cause blockages in blood vessels. Other risk factors for poor circulation include smoking, obesity, and prolonged periods of sitting or standing.

You should give up habits that may interfere with circulation, such as smoking tobacco or drinking caffeinated beverages, both of which can constrict blood vessels. If you are overweight, losing weight may make a difference, and getting regular physical activity can improve circulation. Plus, wear shoes that are wide enough and not too tight on your feet.

Taking calcium and magnesium supplements might also help relax blood vessels and improve circulation. Women can

take 1,200 to 1,500 mg of calcium and 600 to 750 mg of magnesium per day, in at least two divided doses. Men may want to take no more than 1,000 mg of calcium daily (plus 500 mg of magnesium), because some research suggests a high intake of calcium may increase prostate cancer risk. Also, you may wish to enhance blood flow by trying acupuncture or reflexology, which applies pressure to specific points on the feet.

Is massage good for cancer patients on chemotherapy?

I see no risk in using massage while undergoing chemotherapy since it may boost immunity, promote relaxation, and improve self-image. However, the American Massage Therapy Association advises patients with cancer and other serious health concerns to consult with their doctor before receiving massage therapy. Some practitioners warn patients against receiving deep-tissue massage, suggesting it may cause

SELF-CARE

Contending with Coughs

The sounds of December include Christmas carols, Chanukah songs, and a cacophony of coughing.

Although annoying, coughing is simply the body's way of clearing mucus and foreign matter from the lungs, airways, and throat. Most coughs are due to self-limited maladies like colds and flu. But a nagging cough can also signal a chronic health problem.

Coughs from colds and flu: If you've come down with a winter bug, your first goal isn't to suppress a cough but to make it more productive—helping to thin mucus and making it easier to cough up. To do this, drink extra fluids, especially warm liquids like teas and soups. Also, breathe in steam—from a hot shower, a vaporizer, or a pot of hot water—a few times a day. And try eating freshly prepared horseradish or wasabi (Japanese horseradish) on crackers; both of these pungent condiments help thin bronchial secretions. If you have a productive cough that's still lingering after using the above remedies for a few days, I suggest taking an over-the-counter (OTC)

expectorant cough medication containing guaifenesin, which loosens mucus.

When a cough is dry, or nonproductive, and caused by throat irritation, suck on hard candy or lozenges. I like slippery elm lozenges: This herbal remedy, sold in health food stores, coats and soothes irritated tissues in the throat. For dry, bronchial coughs, try using a cough suppressant. Start with the herb mullein: Take a teaspoon of mullein tincture in a little warm water every four hours. If it doesn't stop the cough, look for an OTC medication containing dextromethorphan. If the hacking continues, your doctor may prescribe a suppressant containing codeine. This narcotic is safe if used as directed for a week to 10 days, but can cause drowsiness and constipation.

Chronic cough: The way you treat a chronic cough (lasting 3 weeks or more) depends on its cause. See your doctor to make sure there are no underlying lung problems (like asthma or chronic bronchitis) or allergies to blame. If you smoke, know that "smoker's cough" can mask a second, more serious cause

of cough, like chronic obstructive pulmonary disease (COPD) or lung cancer.

If you don't smoke or have lung disease or allergies, your cough may be due to postnasal drip, gastroesophageal reflux disease (GERD), or some medications. To ease postnasal drip, I suggest avoiding dairy products, which I believe may increase mucus production in some people. I also advise a daily nasal douche with warm saline solution to soothe mucous membranes. (For instructions, see "A Sinus Sufferer's Survival Guide," January 2002.)

If you have heartburn or suspect the acid reflux of GERD may be responsible for your hacking, talk to your doctor about lifestyle measures that can help, such as dietary changes, relaxation techniques, and a better sleeping position. I also recommend taking deglycyrrhizinated licorice (DGL), which may help coughing by reducing the irritating effects of acid reflux; slowly chew and swallow two DGL tablets before or between meals.

Finally, ask your doctor if one of your medications could be causing your cough. Chronic cough is a common side effect of ACE inhibitors, and beta blockers may trigger coughing in asthma patients. Your doctor may be able to substitute another drug. ☼

cancer cells to migrate. But I have seen no good evidence for this and believe massage is beneficial to cancer patients, as long as they work with well-trained massage therapists who are aware of their conditions.

Our two children drink a lot of cow's milk. Is organic milk really better for you, or just more expensive?

If your family consumes a lot of milk, I think it's definitely worth the extra cost to buy organic. To be labeled "organic," milk must be produced without antibiotics, hormones, pesticides, synthetic fertilizers, or genetic modification. Organic herds eat in fields that have been free of pesticides for at least three years and the cows must graze in those fields for at least a year until their milk can be certified organic. These standards ensure the milk is free of contaminants that may be present in non-organic varieties and may be harmful to your health.

Could fecal incontinence be triggered by my diet?

Yes, your diet can worsen fecal incontinence, which is a loss of normal bowel control that results in stool or gas unexpectedly leaking from the rectum. Most common in older people and women, fecal incontinence is usually caused by nerve or muscle damage as a result of vaginal childbirth, hemorrhoid surgery, inflammatory bowel disease, stroke, diabetes, or multiple sclerosis. I'd keep track of which foods or beverages seem to exacerbate the problem: Common culprits are caffeine, dairy products, fatty, spicy, or greasy foods, smoked meats, artificial sweeteners like sorbitol and xylitol, and some fruits. Also, drink enough water and get plenty of fiber, which can make stools bulkier, softer, and easier to control.

Plus, try to train yourself to have bowel movements at the same time each day, which can cut down on accidents. And consider asking your doctor about biofeedback, which can be combined with Kegels. These pelvic exercises help you learn to better control your anal sphincter muscle, which serves as a valve to hold in and push out stool. Strengthening this muscle can help prevent accidents. I'd only recommend colostomy or other types of bowel surgery as a last resort.

How do baker's, brewer's, and nutritional yeasts differ? I'm allergic to baker's yeast, so can I use the others?

There are several strains of these single-celled organisms, which are commonly used in the preparation of fermented foods and beverages. Baker's yeast, for example, is used to make bread dough rise. A bitter-tasting byproduct of the beer-making process, brewer's yeast is rich in protein, minerals, and B vitamins (but not B-12) and is sold as a nutritional supplement in flake, powder, and tablet form. Nutritional yeast is not a byproduct; it's grown specifically for dietary supplement use and has a better taste and nutritional profile than brewer's yeast (some brands are good sources of B-12). Its pleasant nutty-cheesy flavor makes it appealing to vegetarians—as a topping for popcorn, for example. (Neither brewer's or nutritional yeast can be substituted for baker's yeast, which is a living culture.) Unfortunately, your allergy to baker's yeast may also apply to brewer's and nutritional yeasts, since they are closely related organisms. 🍄

HEALTH IN THE NEWS

This Just In . . .

Two More Strikes against HRT

Two studies published in the October 1, 2003 issue of the *Journal of the American Medical Association* add to a growing body of evidence that the health risks to women from taking hormone replacement therapy (HRT) seem to outweigh the potential benefits. For instance, physicians had previously recommended HRT (supplemental estrogen and progestin) to older women with a strong family history of osteoporosis, but now more caution is being advised.

Results from data collected from the Women's Health Initiative, a study of some 16,000 postmenopausal women, found that those who took HRT for about six years had slightly stronger bone densities and a modest reduction in fracture risk, yet these improvements in bone health were not offset by the women's heightened risks for stroke, heart attacks, blood clots, and breast cancer. And a second study analyzing data from this same group of women revealed that HRT use provided some protection against endometrial cancer, but also increased the risk for ovarian cancer.

Comment: Studies now suggest that HRT is most helpful when taken for less than four years at the lowest effective dose to relieve menopausal symptoms, like severe hot flashes. Otherwise, the risks of long-term use seem to outweigh any disease protection provided. Researchers admit that HRT has not yet been studied in cases of advanced osteoporosis, so women who take it for this purpose should discuss their individual risk with their physicians.

Hypnotherapy Helps IBS

Hypnotherapy offers lasting benefits for people with a common gastrointestinal (GI) disorder, according to a British study. Researchers looked at some 200 people with irritable bowel syndrome (IBS), a condition whose uncomfortable GI symptoms may be triggered by stress. Patients attended 12 one-hour hypnotherapy sessions, and then received an audiotape to use at home; they were tracked for up to six years. Of those who initially responded to hypnosis, more than 80 percent continued to have less abdominal pain, bloating, and diarrhea or constipation, and took fewer drugs for IBS—even more than five years after the original sessions. Researchers believe hypnotherapy can alter the muscle activity of the GI tract and its sensitivity. (*Gut*, November 2003)

Comment: Previous research has shown that hypnotherapy can relieve IBS symptoms in the short-term, but this is the first study to measure its long-term benefits. I've long recommended hypnotherapy to people with IBS, and I think this study is one more example of how the mind can influence the body. (To find a hypnotherapist, visit www.asch.net.) 🧠

FAST FACT

Some patients see as many as 10 doctors before being diagnosed with panic disorder.

Halting Panic Attacks

It's not unusual to suddenly feel panicked when you narrowly miss a fender-bender or nearly slip on an icy sidewalk. Your heart races and you're momentarily short of breath—part of the normal “fight or flight” reaction to a stressful situation. But for people with a common type of anxiety-related condition called panic disorder, this fearful reaction usually takes place out of the blue along with other physical symptoms. In panic disorder, a person suffers frequent panic attacks, episodes of severe anxiety that last 10 minutes or more and typically occur for no obvious reason.

To get an idea of what a panic attack is like, imagine that one day you're driving your car and come to a bridge. You've driven this way dozens of times before, but now you suddenly find it difficult to breathe and need to pull over. Your heart pounds, you're dizzy, and you feel spacey and detached from everything around you. Maybe your head starts to hurt, your fingers go numb, or you get a lump in your throat. Although there's no real medical reason for these symptoms, you might worry that you're having a heart attack, losing your mind, or both. That's a panic attack; having several attacks during the course of a month means you've got panic disorder.

The exact cause of panic disorder is unclear, but researchers suspect that it may involve a mix of genetics (it tends to run in families), neurological malfunction, or a chemical imbalance in the brain that can be triggered by stress. But panic disorder involves learned behavior, too: Eventually, you may so dread having another panic attack that you restrict your activities to avoid certain places you have learned to associate with panic (the bridge, for example), and you may actually start unconsciously triggering attacks when you are exposed to places like it. The good news, I believe, is that this behavior can also be unlearned with the help of therapy, breathing exercises, and other natural measures.

Stopping Panic in Its Tracks

To treat panic disorder, your doctor may prescribe an antidepressant (which can also control panic in some people) like Prozac or Zoloft to prevent attacks and reduce their severity, or an anti-anxiety drug like Ativan or Xanax for more immediate results. But these medications—although they relieve symptoms—don't get at the root of the underlying psychological problem, and the anti-anxiety drugs are highly addictive. I believe these drugs shouldn't be used for longer than six months or so to help you feel better until psychotherapy and other approaches can help you get a handle on panic. Here's my advice for managing panic disorder naturally.

Talk about it. Shown in studies to be at least as effective as medication at preventing panic attacks, cognitive-behavioral therapy (CBT) helps people with panic disorder recognize distorted thinking that can lead to panic attacks and adopt new techniques for changing those thought patterns. For example, the therapist may have you imagine, or even expose you to, a frightening situation to induce an attack in her office, then suggest positive self-talk that can help you break the cycle of panic. For more information, contact the National Association of Cognitive-Behavioral Therapists at www.nacbt.org or (800) 853-1135.

Breathe easy. I've seen impressive results in my patients with panic disorder who regularly practice the Relaxing Breath exercise, since people with this condition may hold their breath or hyperventilate, often unconsciously. Regular breath work may help to prevent and abort panic attacks, and can give you an immediate sense of control. Inhale through your nose for a count of 4, hold for a count of 7, and exhale through your mouth for a count of 8 at least twice a day. This is the single most effective treatment I've found for panic disorder. (For detailed instructions and additional exercises, see my books or listen to my recording *Breathing: The Master Key to Self Healing*; call 888-337-9345 to order.)

Go with the flow. Panic attacks are fed by the fear of having them. You want to learn to recognize when you're having an attack, stay in the present moment, and not worry about what might happen next. Remind yourself that the physical symptoms you're feeling are not signs of true disease or danger, and will pass.

Relax. In addition to breath work, I recommend practicing a relaxation technique on a daily basis to relieve the stress that can trigger panic attacks. Options include yoga, progressive muscle relaxation, and meditation, which research suggests can reduce the number and severity of panic attacks.

Avoid triggers. Certain substances can trigger the same symptoms as a panic attack, so avoid caffeine and nicotine as well as stimulating herbs like ephedra and guaraná.

Supplement wisely. While kava has anti-anxiety effects that may also help ease panic, recent reports have linked this herb to liver damage, and I no longer recommend it. Sedative herbs like valerian may also help to reduce the frequency of panic attacks. You can take a capsule of valerian up to three times a day as needed, but because valerian may cause drowsiness, avoid driving for two to three hours after taking it.

Still, I view such herbs in the same way as medications: They may help in the short-term, but can prevent you from getting to the root of your panic. For this reason, I suggest using them for no longer than six months or so. ☯

coming up

Integrative medicine **clinics** • Tips for managing **gallstones**
• **Black cohosh** • Preventing **stroke** • And much more.

Andrew Weil, who received an AB degree in biology (botany) from Harvard and an MD from Harvard Medical School, is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, and integrative medicine, and the author of nine books, including *Natural Health*, *Natural Medicine*, *Spontaneous Healing*, *Eight Weeks to Optimum Health*, and *Eating Well for Optimum Health*.

another resource from Dr. Weil:

www.drweil.com

For customer service or to order subscriptions to *Self Healing*, please call (800) 523-3296.